

**Doctor and patient / by S. Weir Mitchell.**

**Contributors**

Mitchell, S. Weir 1829-1914.

**Publication/Creation**

Philadelphia ; London : J. B. Lippincott, 1904.

**Persistent URL**

<https://wellcomecollection.org/works/mme8fcgs>

**License and attribution**

The copyright of this item has not been evaluated. Please refer to the original publisher/creator of this item for more information. You are free to use this item in any way that is permitted by the copyright and related rights legislation that applies to your use.

See [rightsstatements.org](https://rightsstatements.org) for more information.

**wellcome  
collection**

Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>

DOCTOR AND PATIENT

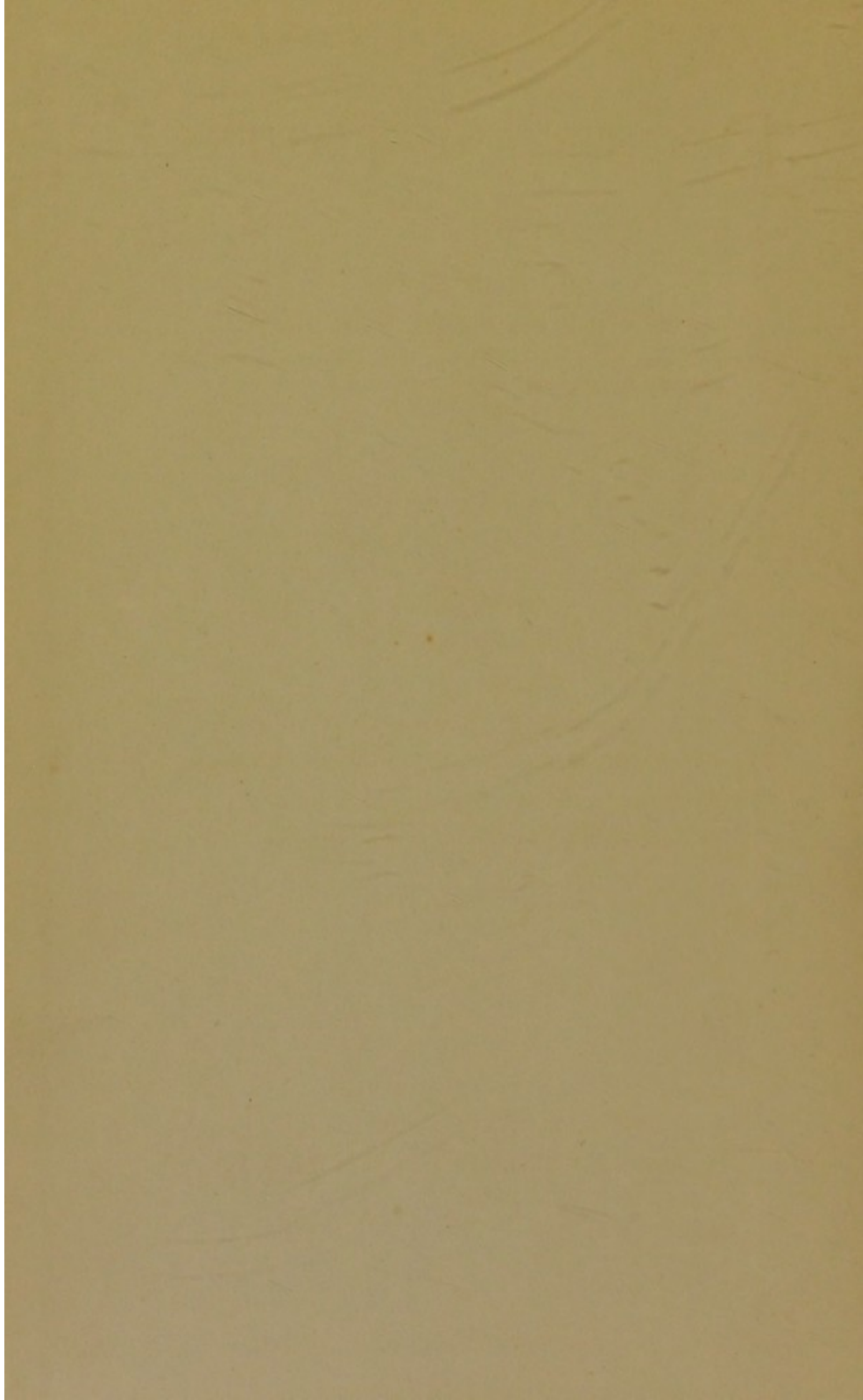
---

S. WEIR MITCHELL, M.D.



22200197888

Med  
K20290



# DOCTOR AND PATIENT.

BY

S. WEIR MITCHELL, M.D., LL.D.

MEMBER OF THE UNITED STATES NATIONAL ACADEMY OF SCIENCES;  
PHYSICIAN TO THE ORTHOPÆDIC HOSPITAL AND INFIRMARY  
FOR NERVOUS DISEASES.

---

*Introductory.*

*The Physician.*

*Convalescence.*

*Pain and the Opium Habit.*

*The Moral Management of Sick or Invalid Children.*

*Nervousness and its Influence on Character.*

*Out-Door and Camp-Life for Women.*

FOURTH EDITION.

PHILADELPHIA AND LONDON:  
J. B. LIPPINCOTT COMPANY.

1907.

Copyright, 1887, by J. B. LIPPINCOTT COMPANY.

Copyright, 1904, by J. B. LIPPINCOTT COMPANY.

337109

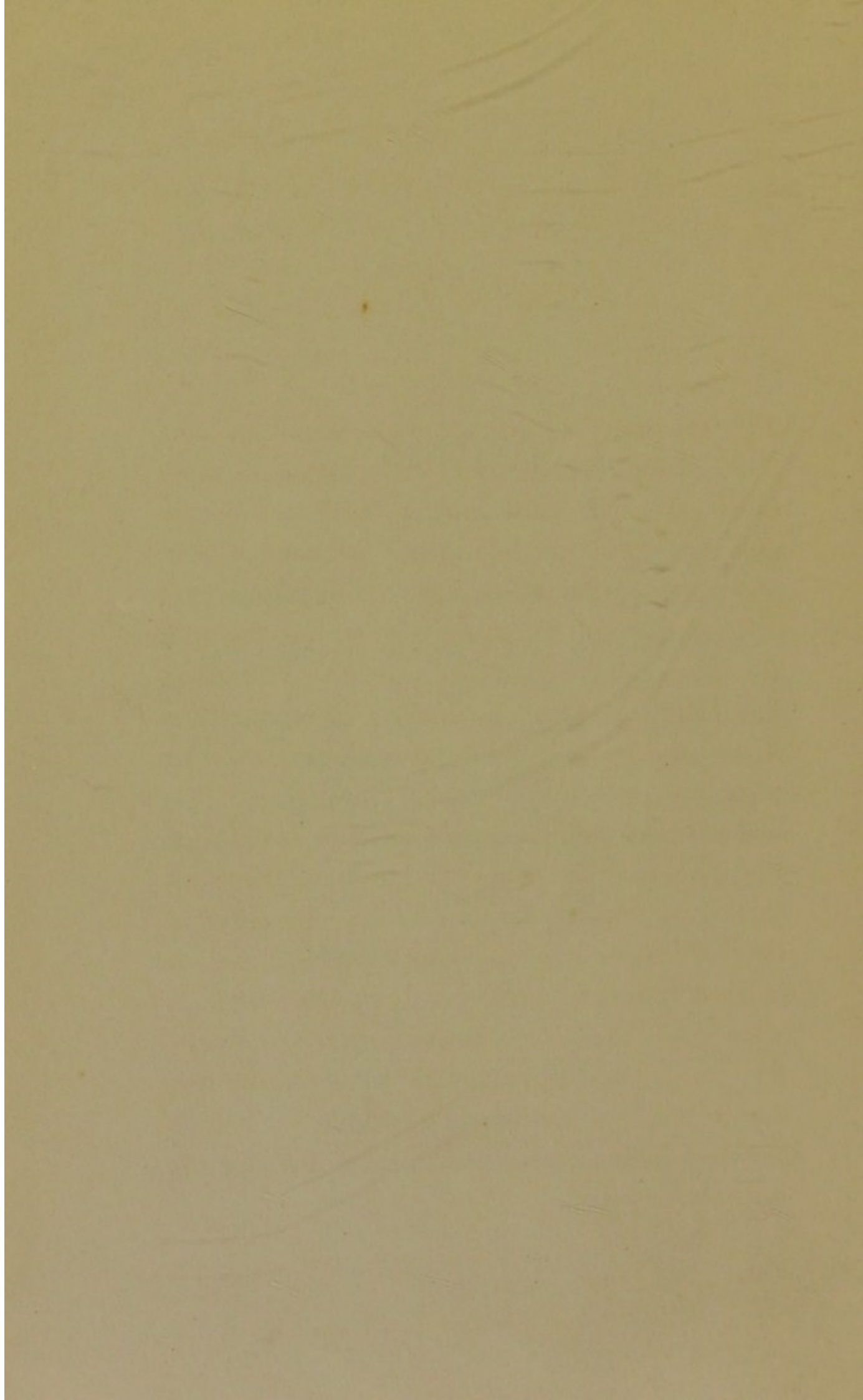
WELLCOME INSTITUTE LIBRARY	
Coll.	welMomec
Call	
NO.	W

## CONTENTS.

---

	PAGE
INTRODUCTORY . . . . .	5
THE PHYSICIAN . . . . .	14
CONVALESCENCE . . . . .	57
PAIN AND THE OPIUM HABIT . . . . .	83
THE MORAL MANAGEMENT OF SICK OR INVALID CHILDREN . . . . .	101
NERVOUSNESS AND ITS INFLUENCE ON CHARACTER .	115
OUT-DOOR AND CAMP-LIFE FOR WOMEN . . . . .	155





## INTRODUCTORY.

---

THE essays which compose this volume deal chiefly with a variety of subjects to which every physician must have given more or less thought. Some of them touch on matters concerning the mutual relation of physician and patient, but are meant to interest and instruct the laity rather than the medical attendant. The larger number have from their nature a closer relation to the needs of women than of men.

It has been my fate of late years to have in my medical care very many women who, from one or another cause, were what is called nervous. Few of them were so happily constituted as to need from me neither counsel nor warnings. Very often such were desired, more commonly they were given unsought, as but a part of that duty which the physician feels, a duty which is but half fulfilled when we think of the body as our only province.

Many times I have been asked if there were no book that helpfully dealt with some of the questions which a weak or nervous woman, or a woman who has been these, would wish to have answered. I knew of none, nor can I flatter myself that the parts of this present little volume, in which I have sought to aid this class of patients, are fully adequate to the purpose.

I was tempted when I wrote these essays to call them lay sermons, so serious did some of their subjects seem to me. They touch, indeed, on matters involving certain of the most difficult problems in human life, and involve so much that goes to mar or make character, that no man could too gravely approach such a task. Not all, however, of these chapters are of this nature, and I have, therefore, contented myself with a title which does not so clearly suggest the preacher.

It would be scarcely correct to state that their substance or advice was personally addressed to those still actually nervous. To them a word or two of sustaining approval, a smiling remonstrance, or a few phrases of definite explanation, are all that the wise and patient doctor should then wish to use. Constant inquiries and a too

great appearance of what must be at times merely acted interest, are harmful.

When I was a small boy, my father watched me one day hoeing in my little garden. In reply to a question, I said I was digging up my potatoes to see if they were growing. He laughed, and returned, "When you are a man, you will find it unwise to dig up your potatoes every day to see if they are growing." Nor has the moral of his remark been lost on me. It is as useless to be constantly digging up a person's symptoms to see if they are better, and still greater folly to preach long sermons of advice to such as are under the despotism of ungoverned emotion, or whirled on the wayward currents of hysteria. To read the riot act to a mob of emotions is valueless, and he who is wise will choose a more wholesome hour for his exhortations. Before and after are the preacher's hopeful occasions, not the moment when excitement is at its highest, and the self-control we seek to get help from at its lowest ebb.

There are, as I have said, two periods when such an effort is wise,—the days of health, or of the small beginnings of nervousness, and of the uncontrol which is born of it, and the time when,

after months or years of sickness, you have given back to the patient physical vigor, and with it a growing capacity to cultivate anew those lesser morals which fatally wither before the weariness of pain and bodily weakness.

When you sit beside a woman you have saved from mournful years of feebleness, and set afoot to taste anew the joy of wholesome life, nothing seems easier than with hope at your side, and a chorus of gratitude in the woman's soul, to show her how she has failed, and to make clear to her how she is to regain and preserve domination over her emotions; nor is it then less easy to point out how the moral failures, which were the outcome of sickness, may be atoned for in the future, now that she has been taught to see their meaning, their evils for herself, and their sad influence on the lives of others.

To preach to a mass of unseen people is quite another and a less easy matter. I approach it with a strong sense that it may have far less certain utility than the advice and exhortation addressed to the individual with such force as personal presence, backed by a knowledge of their peculiar needs, may give. I am now, then, for the first time, in the position of the higher

class of teachers, who lay before a multitude what will be usefully assimilated by the few.

If my power to say what is best fitted to help my readers were as large as the experience that guides my speech, I should feel more assured of its value. But sometimes the very excess of the material from which one is to deduce formulas and to draw remembrances is an embarrassment, for I think I may say without lack of modesty in statement, that perhaps scarce any one can have seen more of women who have been made by disease, disorder, outward circumstance, temperament, or some combination of these, morbid in mind, or been tormented out of just relation to the world about them.

The position of the physician who deals with this class of ailments, with the nervous and feeble, the painworn, the hysterical, is one of the utmost gravity. It demands the kindest charity. It exacts the most temperate judgments. It requires active, good temper. Patience, firmness, and discretion are among its necessities. Above all, the man who is to deal with such cases must carry with him that earnestness which wins confidence. None other can learn all that should be learned by a physician of

the lives, habits, and symptoms of the different people whose cases he has to treat. From the rack of sickness sad confessions come to him, more, indeed, than he may care to hear. To confess is, for mysterious reasons, most profoundly human, and in weak and nervous women this tendency is sometimes exaggerated to the actual distortion of facts. The priest hears the crime or folly of the hour, but to the physician are oftener told the long, sad tales of a whole life, its far-away mistakes, its failures, and its faults. None may be quite foreign to his purpose or needs. The causes of breakdowns and nervous disaster, and consequent emotional disturbances and their bitter fruit, are often to be sought in the remote past. He may dislike the quest, but he cannot avoid it. If he be a student of character, it will have for him a personal interest as well as the relative value of its applicative side. The moral world of the sick-bed explains in a measure some of the things that are strange in daily life, and the man who does not know sick women does not know women.

I have been often asked by ill women if my contact with the nervous weaknesses, the petty

moral deformities of nervous feminine natures, had not lessened my esteem for woman. I say, surely, no! So much of these is due to educational errors, so much to false relationships with husbands, so much is born out of that which healthfully dealt with, or fortunately surrounded, goes to make all that is sincerely charming in the best of women. The largest knowledge finds the largest excuses, and therefore no group of men so truly interprets, comprehends, and sympathizes with woman as do physicians, who know how near to disorder and how close to misfortune she is brought by the very peculiarities of her nature, which evolve in health the flower and fruitage of her perfect life.

With all her weakness, her unstable emotionality, her tendency to morally warp when long nervously ill, she is then far easier to deal with, far more amenable to reason, far more sure to be comfortable as a patient, than the man who is relatively in a like position. The reasons for this are too obvious to delay me here, and physicians accustomed to deal with both sexes as sick people will be apt to justify my position.

It would be easy, and in some sense valuable, could a man of large experience and intelligent



sympathies write a book for women, in which he would treat plainly of the normal circle of their physiological lives; but this would be a method of dealing with the whole matter which would be open to criticism, and for me, at least, a task difficult to the verge of the impossible. I propose a more superficial plan as on the whole the most useful. The man who desires to write in a popular way of nervous women and of her who is to be taught how not to become that sorrowful thing, a nervous woman, must acknowledge, like the Anglo-Saxon novelist, certain reputable limitations. The best readers are, however, in a measure co-operative authors, and may be left to interpolate the unsaid. A true book is the author, the book and the reader. And this is so not only as to what is left for the reader to fill in, but also has larger applications. All this may be commonplace enough, but naturally comes back to one who is making personal appeals without the aid of personal presence.

Because what I shall write is meant for popular use rather than for my own profession, I have made my statements as simple as possible. Scarcely a fact I state, or a piece of advice I give, might not be explained or justified by

physiological reasoning which would carry me far beyond the depth of those for whom I wrote. All this I have sedulously avoided.

What I shall have to say in these pages will trench but little on the mooted ground of the differences between men and women. I take women as they are to my experience. For me the grave significance of sexual difference controls the whole question, and, if I say little of it in words, I cannot exclude it from my thought of them and their difficulties. The woman's desire to be on a level of competition with man and to assume his duties is, I am sure, making mischief, for it is my belief that no length of generations of change in her education and modes of activity will ever really alter her characteristics. She is physiologically other than the man. I am concerned with her now as she is, only desiring to help her in my small way to be in wiser and more healthful fashion what I believe her Maker meant her to be, and to teach her how not to be that with which her physiological construction and the strong ordeals of her sexual life threaten her as no contingencies of man's career threaten in like measure or like number the feeblest of the masculine sex.

## THE PHYSICIAN.

---

I HAVE long had in mind to write from a physician's point of view something in regard to the way in which the well-trained man of my profession does his work. My inclination to justify the labors and sentiments of an often misunderstood body of men was lately reinforced by remarks made to me by a very intelligent patient. I found him, when I entered my room, standing before an admirable copy of the famous portrait of the great William Harvey, the original of which is in the Royal College of Physicians. After asking of whom it was a likeness, he said, "I should be a little curious to know how he would have treated my case."

I had to confess that of Harvey's modes of practice we know little, but I took down from a shelf those odd and most interesting letters of Howell's, clerk of council to James I.,

and turned to his account of having consulted Harvey on returning home from Spain. Only too briefly he tells what was done for him, but was naturally most concerned about himself and thus missed a chance for us, because it so happens that we know little of Harvey. At this page of *Howelliana* was a yellow paper-marker. Once the book was Walpole's, and after him was Thackeray's, and I like to fancy that Walpole left the marker, and that Thackeray saw it and left it, too, as I did.

My patient, who liked books, was interested, and went on to say that he had seen several physicians in Europe and America. That in France they always advised spas and water-cure, and that at least three physicians in America and one in London had told him there was nothing the matter with him, and that finally a shrewd country doctor had remarked bluntly that he would not give him any medicine, because he was overdosed already with work and worries, which was true.

At last he came back to Harvey. "He looks ill," he said, which is true. His honestly-painted knuckles make diagnosis easy. My friend thought that this great man would prob-

ably have dosed him well, and, as he added, would not have bothered him about too much sugar, nor forbidden champagne. I had to reply that whatever ills were in the England of that day,—and there was much dyspepsia and much gout,—sugar was the luxury of the rich, and anything but as abundant as it is to-day, when we consume annually fifty-six pounds per head or per stomach. I told him that in all ages the best of us would have dwelt most on diet and habits of living, and that Harvey was little likely to have been less wise than his peers, and he has had but few. Then he said it would be curious to put on paper a case, and to add just what a doctor in each century would have ordered. The idea struck me as ingenious and fertile. I could wish that some one would do this thing. It would, I think, be found that the best men of every time were most apt to consider with care the general habits of their patients as to exercise and diet, and to rely less than others on mere use of drugs. As to this matter, one learns more from men's lives than from their books, but nowadays care as to matters of hygiene has become in a valuable degree the common wisdom of a large part of my pro-

fession. Surveying our vast gains, we are a little apt to undervalue the men of older days, and no lesson is wiser than sometimes to go back and see how the best of them thought and acted amidst the embarrassments of imperfect knowledge.

There is a charming life by Henry Morley, of Cardan, the great Italian physician and algebraist, which gives us in accurate detail the daily routine of a doctor's days in the sixteenth century. In it is an account of Cardan's professional visit in 1551 to John Hamilton, archbishop of St. Andrew's, Scotland, and practically the ruler of that turbulent realm. Cardan's scientific opinion as to his patient is queer enough, but, as Morley remarks, it is probably not more amusing to us than will be our opinion in a like case to the smiling brother of our guild who may chance to read it at some remote future day. The physician of whom I now write was one who already dreaded bleeding, thought less of medicines than his fellows, and was, in fact, exceptionally acute. He did some droll things for the sick prelate, and had reasons yet more droll for what he did, but his practice was, as **may** happen on the whole, wiser than his reasons

for its use. His patient was a man once bulky, but now thin, overworked, worried, subject to asthma, troubled with a bad stomach, prone to eat largely of coarse food, but indisposed to physical exercise. Cardan advised that the full, heated head, of which his patient much complained, should be washed night and morning with hot water in a warm room, and then subjected to a cold shower-bath. Next was to come a thorough dry rubbing, and rest for two hours. As to his asthma, he forbade him to subject himself to night air or rainy weather. He must sleep on silk, not feathers, and use a dry pillow of chopped straw or sea-weed, but by no means of feathers. He forbade suppers if too late, and asked the reverend lord to sleep ten hours, and even to take time from study or business and give it to bed. He was to avoid purgatives, to breakfast lightly, and to drink slowly at intervals four pints a day of new asses' milk. As to other matters, he was to walk some time in the shade at an early hour, and, discussing the time for the fullest meal, Cardan remarks that established habits as to this point are not to be lightly considered. His directions as to diet are many, reasonable, and careful. His patient, once stout,

had become perilously thin. Turtle-soup and snail-broth would help him. Cardan insisted also on the sternest rules as to hours of work, need for complete rest, daily exercise, and was lucky enough to restore his patient to health and vigor. The great churchman was grateful, and seems to have well understood the unusual mental qualities of his physician. Nothing on the whole could be better than the advice Cardan gave, and the story is well worth reading as an illustration of the way in which a man of genius rises above the level of the routine of his day.

I might go farther back in time, and show by examples that the great fathers of medicine have usually possessed a like capacity, and learned much from experience of that which, emphasized by larger use and explained by scientific knowledge, has found its way into the text-books of our own day and become common property.

It appears to me from a large mental survey of the gains of my profession, that the English have above all other races contributed the most towards enforcing the fact that on the whole dietetics, what a man shall eat and drink, and also how he shall live as to rest, exercise, and



work, are more valuable than drugs, and do not exclude their use.<sup>1</sup>

The active physician has usually little time nowadays to give to the older books, but it is still a valuable lesson in common sense to read, not so much the generalizations as the cases of Whytt, Willis, Sydenham, and others. Nearer our own day, Sir John Forbes, Bigelow, and Flint taught us the great lesson that many diseases are self-limited, and need only the great physician, Time, and reasonable dietetic care to get well without other aid.

There is a popular belief that we have learned this from homœopathy, for the homœopath, without knowing it, made for us on this matter ample experiments, and was as confident he was giving powerful medicines as we are that he was giving practically none. "He builded better than he knew," and certainly his results aided our ablest thinkers to reach the truth.

I have named one of the most illustrious

---

<sup>1</sup> By this I mean that the physician, if forced to choose between absolute control of the air, diet, exercise, work, and general habits of a patient, and use of drugs without these, would choose the former, and yet there are cases where this decision would be a death-warrant to the patient.

of physicians, Sydenham, as among the great Englishmen who brought to their work the clearest perception of how nature was to be best aided. He will answer admirably to exemplify my meaning.

Sydenham was born in 1624, and lived in and through the wild periods of Charles I. and Cromwell, and was himself a stanch republican. He more than any other in his century decisively taught caution as to mere medication, and sedulously brought the clear light of common sense to bear upon the practice of his time. It is interesting to note, as his biographer remarks, that his theories were often as worthless as his practice was good. Experience taught him to do that for which he felt forced to find a reason, and the reason was often enough absurd. "The contrast gives a fine light and shadow effect in his biography."<sup>1</sup>

His systematic beliefs were oftentimes worthless, but great acuteness in observation was apt to lead him to do wisely in individual cases what was at variance with his creed. Speaking of Hippocrates, he says, "His system led him to assist

---

<sup>1</sup> R. G. Latham, p. xxxvi.

nature, to support her when enfeebled and to the coercion of her when she was outrageous.”

As to mere drugs, Sydenham used them in what was for his day an extremely moderate fashion, and sagaciously limited in the old and young his practice as to bleeding, which was then immensely in vogue. The courage required to treat smallpox, measles, and even other fevered states by cooling methods, must have been of the highest, as it was boldly in opposition to the public and private sentiment of his day. He had, too, the intelligence to learn and teach that the Jesuit bark, cinchona, was a tonic as well as the master of the agues, so common in the England of his time.

He is at his best, however, in his statement of how he treated individual cases, for then his written theories are given to the winds, or the practice is far beyond the creed in its clear common-sense value.

Thus, horseback exercise he constantly speaks of. He tells you of a friend who had been much dosed by many for dyspepsia, and how he bade him ride, and abandon drugs, and how, after a thousand miles of such riding, he regained health and vigor. See how this wise man touches

the matter of gout: "For years a man has feasted; has omitted his usual exercises; has grown slow and sluggish; has been overstudious or overanxious, etc." Then he reasons about "smothering the animal spirits, which are the primary instruments of concoction," and so on, but at last he says, "We must look beyond medicines. Wise men do this in gout and in all other chronic diseases." And what does he advise? Here is the substance of what he says. A gouty man must be moderate, not too abstinent, so as to get weak. One meat is best; mixtures are bad. A milk diet "has prevailed," only bread being added, but it must be rigid and has its risks. He seems to have kept a nobleman on milk a year. Also there must be total abstinence from wine and all fermented liquors. Early bed hours and early rising are for the gouty. Then there come wise words as to worry and overwork. But, above all, the gouty must ride on horseback and exercise afoot. As to the wilder passions of men, he makes this strangely interesting remark, "All such the old man should avoid, for," he says, "by their indulgence he thus denies himself the privilege of enjoying **that** jubilee which by the special and kind gif<sup>t</sup>

of nature is conceded to old men: of whom it is the natural and happy lot to be emancipated from the control of those lusts which during youth attacked them."

This is a fair specimen of a master at his best. I would rather have trusted Sydenham, with all his queer theories, than many a man with the ampler resources of to-day; for his century may aid but does not make the true physician, who is not the slave, but the master, of opinions.

To enforce again the fact that the greater men of my art, even in days of the most extreme theories, were more sensible in their daily practice than in their dogmatic statements, I would like to quote a letter of Rush, which for several reasons is interesting and valuable. No man was more positive in his beliefs and in the assertion of them than he. His name is still associated with bleeding and purging, and if we considered only some of his written assertions, made with the violence which opposition always aroused in his positive nature, we should pause in wonder at his great reputation. But what a man says or writes, and what he does, are often far apart. We are apt to take his most decisive statements as representative, and thus may seriously err. I

have known a number of men who were really trustworthy physicians, and who yet were credited by us with a fondness for absurd ideas, which, in fact, influenced their writings far more than their practice. Rush was to some extent one of this class. His book on insanity is far in advance of his time, and his descriptions of disease one of our best tests, most admirable. Let us see how this physician who bled and dosed heavily could think and act when face to face with a hopeless case. The letter to which I have referred was given to the College of Physicians of Philadelphia at my request by one of its associate fellows, Dr. Hunter Maguire, of Richmond, Virginia. It is written to Rush's cousin, Dr. Thornton, in 1789, and has an added interest from the fact that it is a letter of advice in the case of the aged mother of Washington, who had a cancer of the breast.

“PHILADELPHIA, July 6, 1789.

“MY DEAR KINSMAN:

“The respectable age and character of your venerable patient leads me to regret that it is not in my power to suggest a remedy for the cure of the disorder you have described in her

breast. I know nothing of the root that you mention as found in Carolina and Georgia, but, from a variety of inquiries and experiments, I am disposed to believe that there does not exist in the vegetable kingdom an antidote to cancers. All the vegetable remedies I have heard of are composed of some mineral caustics. The arsenic is the most powerful of any of them. It is the basis of Dr. Martin's powder. I have used it in many cases with some success, but have failed in some. From your account of Mrs. Washington's breast, I am afraid no great good can be expected from the use of it. Perhaps it may cleanse it, and thereby retard its spreading. You may try it diluted in water. Continue the application of opium and camphor, and wash it frequently with a decoction of red clover. Give anodynes when necessary, and support the system with bark and wine. Under this treatment she may live comfortably many years, and finally lie of old age."

He had here to deal with cancer, a disease which he knew to be incurable. His experience taught him, however, that in the very old this **malady** is slow and measured in its march, and

What he could only aid and not cure. What he says might with slight change have been penned to-day. We have gone no further in helpfulness as regards this sad disease.

If what I write now is to have for the laity any value, it will be in correcting certain of their judgments as to physicians, and in suggesting to them some of the tests which will enable them to exercise a reasonable judgment as to those in whose hands they place so often without a thought the issues of life and death and the earthly fates of their dearest.

I began, somewhat discursively, by showing how much care the masters of my art gave even in past days to matters of diet and modes of life. This is still to-day a test of larger applicability. There are those of my profession who have a credulity about the action of drugs, a belief in their supreme control and exactness of effect which amounts to superstition, and fills many of us with amazement. This form of idolatry is at times the dull-witted child of laziness, or it is a queer form of self-esteem, which sets the idol of self-made opinion on too firm a base to be easily shaken by the rudeness of facts. But, if you watched these men, you would find them



changing their idols. Such too profound belief in mere drugs is apt, especially in the lazy thinker, to give rise to neglect of more natural aids, and these tendencies are strengthened and helped by the dislike of most patients to follow a schedule of life, and by the comfort they seem to find in substituting three pills a day for a troublesome obedience to strict rules of diet, of exercise, and of work.

The doctor who gives much medicine and many medicines, who is continually changing them, and who does not insist with care on knowing all about your habits as to diet, meal-times, sleep, modes of work, and hours of recreation, is, on the whole, one to avoid. The family doctor is most of all apt to fail as to these details, especially if he be an overworked victim of routine, and have not that habitual vigilance of duty which should be an essential part of his value. He is supposed to have some mysterious knowledge of your constitution, and yet may not have asked you a medical question in months or years. Too much is taken for granted, and inefficient opinions are the outcome of carelessness. Every new case in a household should be dealt with as if it were a stranger's, and outside

familiarity should not be allowed to breed contempt of caution in study or lead to half measures. Every consultant will agree with me that this kind of social nearness of the doctor to his patient is a common cause of inert advice, and nowhere more distinctly so than when unwise physicians attempt to practise in their own households on those they love.

There are very few instances of chronic ailments, however slight, which should not be met by advice as to modes of living, in the full breadth of this term; and only by a competent union of such, with reasonable use of drugs, can all be done most speedily that should be done. I have said "with use of drugs," for I am far from wishing to make any one believe that medicines are valueless. Nor do I think that the most extreme dosing employed nowadays by any one is as really hurtful as the neglect to urge efficiently the value of definite hygienic means. There are, indeed, diseases which can only be helped by heroic measures; but, in this case, were I the patient, I should like to be pretty certain as to the qualifications of my hero.

The popular view of the great hurtfulness of

drugs is curiously fallacious. I have spoken above more of their relative usefulness, as compared to other means of relief, than with any desire to convince my readers that they are such terrible things as some kinds of practitioners would have us to believe. The dread of their employment is a relic of the time of reaction against the senseless and excessive dosing with calomel and strong purges, and nowadays, even as regards bleeding, once wholly abandoned, it is clear that it still has at times its uses, and valuable ones, too. As medicines are now employed, even by the thoughtless, it must be rarely that they give rise to permanent injury. Let any physician who reads these lines pause and reflect how many times in his life he has seen lasting or serious evil results from drugs.

Accidents happen, but they are the offspring of carelessness. Sometimes, also, unexpected and temporary extreme results surprise us, as when an opiate purges, or five grains of an iodide prove to be gravely poisonous. These occurrences are due to individual peculiarities, which we can as yet neither explain nor anticipate. One man can take opium with almost the impunity which belongs naturally to birds.

Another is put to sleep by the dose you give a baby. All this teaches caution, but it is not a matter for blame when it gives rise to alarming consequences, and happily these cases of what we call idiosyncrasies are exceptionally uncommon.

Physicians are often enough tempted to give a simple placebo to patients who are impatient, and ask instant treatment when we know that time is what we want, either for study of present symptoms or to enable the growing disorder to spell itself out for us, as it were, letter by letter, until its nature becomes clear. The practice is harmless, but there is, of course, a better way, if we possess the entire confidence of the patient or his friends. But sometimes it is undesirable to give explanations until they can be securely correct, or haply the sick man is too ill to receive them. Then we are apt, and wisely, to treat some dominant symptom, and to wait until the disease assumes definite shape. So it is that much of what we thus give is mild enough. The restless mother is the cause with some doctors of much of this use of mere harmless medicines. I once expressed surprise in a consultation that an aged physician, who had called me in, should be so desirous of doing something, when I as earnestly

wished to wait. At last he said, "Doctor, it is not the child I want to dose; it is the mother's mind." Perhaps the anecdote may not be lost on some too solicitous woman, who naturally desires that the doctor should be doing something just when he is most anxious to be doing nothing.

Men yet live who can remember when all of our knowledge of disease was acquired by the unaided use of the eye, the ear, and the touch. The physician felt the pulse, and judged of fever by the sense of warmth. He looked at the skin and tongue and the secretions, and formed conclusions, more or less just in proportion to the educated acuteness of his senses and the use he made of these accumulations of experience. The shrewdness of the judgments thus formed shows us, to our wonder, how sharply he must have trained his senses, and has led some to suspect that our easier and more exact methods and means may have led us to bestow less care in observation than did these less aided and less fortunate students. The conclusion is, I am sure, erroneous, and I am confident that the more refined the means the more do they train us to exactness in all directions, so that even

what we now do with the eye, ear, or hand alone is better and more carefully done than when the senses had none of the training due to the use of instruments of precision. I may add that the results of their employment have also made it easy in many cases to dispense with them, and to interpret readily what has been won by the unassisted sense.

The history of precision in medicine is worth the telling, if only to teach the lay reader something of that vast struggle to know the truths of disease, which is little understood beyond the ranks of the most scholarly of my profession. The first step was due to Galileo. In 1585 he used his pendulum to record the pulse, in a fashion at which we smile to-day, and yet what he tried to do was the birth of precision in medicine. Keeping a finger on the pulse, he set a pendulum in motion. If it went faster than the pulse, he put the weight a little lower, or as I may state it to make it clearer, he lengthened the pendulum. At last when it moved so as to beat equal time with the pulse, he measured the length of the swinging bar, and set down the pulse as, say ten inches; next day it might be set at six, and so a record was made. He was soon

lost to medicine, but in 1625, Santorini, known to science as Sanctorius, published a curious book, called "Commentaries on Avicenna," in which he figured a variety of similar instruments, called "pulsilograms." We owe to him some of the first accurate studies of diet, and also the discovery of the insensible perspiration, but his pulsilogram was soon forgotten.

I think that Harvey but once or twice mentions the number of the pulse even in his physiological books. In the case descriptions of his time and of Sydenham's it is rare to find it noted, and this is true as a rule all through the next century. The exceptions are interesting. In Whytte's works, *circa* 1745, he not rarely mentions the pulse number in connection with his primary delineation of a case, but after that does not often speak of its subsequent changes in number. The force and other characters of the pulse receive, however, immense attention, and are on the whole more valuable aids than mere numeration; but that cannot nowadays be left out of our calculations, yet as early as the reign of Anne, about 1710, an English physician, Sir John Floyer, wrote an able and now half-forgotten book, quaintly called the "Pulse Watch."

I am pretty sure that he was the first to put a minute-hand on a watch to enable him to time the pulse-beat, but nowhere in any English collection have I been able to find one of his watches. Thus aided, he was the first to count the minute's pulse, which is now a sort of recognized and accepted matter as standard of comparison, so that we say merely, the pulse was 60 or 90, as may chance, and do not even speak of the minute. It is as true as strange that this convenient method was practically lost to habitual use in medicine for quite a hundred years. It reappeared in the writings of the time of the great teachers who arose in France and Germany about 1825. To-day, in case of need, we have instruments which write in instructive curves the form of the pulse-wave, and enable us to settle questions which sometimes could not be settled without this delicate means.

The study of the temperature of the body was, as I have said, a mere matter of the touch until our same Galileo applied a thermometer to learn more accurately its changes. Sanctorius again followed in his steps, and has left us in his works curious drawings of forms of thermometer applicable to medical uses. Our profession



is, however, inapt to hold on to useless things, and our knowledge of fever, its risks and its remedies, was for many a day far behind any need for the delicate appreciations of the thermometer.

Hence it is that very few physicians did more in the last three centuries as regards the temperature of the body than speak of it as high or low. Sanctorius was too far ahead of his time to teach us the true value of medical thermometry. It was forgotten for many a day. In the last century, in Dehaen and Hunter, it again receives some notice, and again drops out of use. At last we are ripe for it, and Wunderlich, in a classical book, about twenty-five years ago, puts it in a position of permanent utility. The physician of to-day knows more both of fever and of its consequences, and finds in his thermometer an indispensable ally.

Within but a few years the instruments of precision have so multiplied that a well-trained consultant may be called on to know and handle as many tools as a mechanic. Their use, the exactness they teach and demand, the increasing refinement in drugs, and our ability to give them in condensed forms, all tend towards making the

physician more accurate, and by overtaxing him, owing to the time all such methodical studies require, have made his work such that only the patient and the dutiful can do it justice.

Primary examinations of chest, heart, and other viscera are long and troublesome, and the first study of a case which is at all difficult, demands such time as it is increasingly hard for the busy to find. A good test for laymen in acute cases is the methodical manner in which a physician of modern training goes over the case, nor is his preciseness as to doses and medicines less worthy of note. I used to watch with interest the late Professor P. at a sick-bed. The grave and tranquil interest, the pauses for thought, the swift thoroughness of examination, and then the delay, with, "Please, nurse, let me taste that last medicine," were full of good lessons. Any consultant could tell you what a rare quality is this union of precision and thoroughness.

Our profession has in its work enough of true difficulties, but we still owe many of our worst errors to want of absolutely complete study of our cases, and with the careless these slips are obvious enough to enable any one who is watch-

ful to sit in judgment on the failures. The more delicate illustrations of the fine union of qualities which attain the highest triumphs are, of course, only seen and comprehended by physicians, whose general opinion on their fellows is in the end almost always a just one. There is a potent combination of alertness in observation, with a never-satisfied desire to know even the trifles of a case, which, with sagacity, gives a medical mental character as rare as it is valuable.

For such men there are no trifles, and, on entering a sick-room, they seem to absorb at a glance matters which escape others, and yet to the end are still so quietly observant and searching that they seem never to be quite content with what they have learned. Not to know surely is to them a form of unhappiness.

I remember well a consultation in a case of great obscurity, into which, many years ago, the late Dr. G. was called, after three of his colleagues had failed to reach a conclusion. It was suspected that poisoning by lead was the cause of a singular and unusual train of symptoms. Now, in such cases, a blue line around the junction of the teeth and gums is a certain sign of

the presence of that poisonous metal. The patient, a man of seventy-five years, was known by his own physician to wear full sets of artificial teeth, and he so said. This having been stated no one looked at the gums. At the close of the second meeting Dr. G. turned back unsatisfied. "Let me see your gums. Ah!" he said. There was the stump of one incisor left, and around it the blue line told a tale which ended all doubt.

On another occasion, a young physician well known to me, fell by a chance into a consultation with Dr. P., the physician I have mentioned, and the late Professor P. The case was one of a young man who several times had been found at morning in a stupor. The attacks were rare, and what caused them was unknown. The young physician, much embarrassed, was civilly asked to examine the case, and did so with a thoroughness which rather wearied the two older men. When they retired to an adjoining room, he was asked, as our custom is, to give, as the youngest, the first opinion. He said, "It is a case of epilepsy. He has bitten his cheek in the fit." Dr. P. rose without a word and went out. Returning in a few moments, he said, "You are

right. I did not look far enough back. You will reach, sir, a high rank in our profession." The case was thenceforward plain enough. These are rare illustrations of my meaning, and may suffice, with one which has a more humorous aspect. Meeting the late Professor C. D. M. on the steps of a house where, the day before, we had seen together a woman critically ill, he said to me, "Mrs. B. is better, doctor, much better." "And how do you know that?" I returned. "Her windows are open, my dear doctor. She wants more light. She must be better, much better." And so she was, as it proved.

A final result of the multiplication of the means of research, and the increasing difficulty in becoming expert in the use of the many and delicate instruments they require, is the growth of what we call specialties in medicine. The best of us learn to use the ophthalmoscope to look into the eye, to use the laryngoscope for the larynx, and can at need examine the urine and the blood, but the men must be rare who are as competent to use each and all of these means as persons who devote themselves to single branches of our work. Moreover, the element of time

comes in, as well as the element of such constant familiar practice as makes for one man commonplace and easy what for another, who is more generally occupied, is uncommon and unfamiliar. The specialist profits by the fact that his experience becomes enormous and his work advantaged by its definite limitations. On the other hand, and nowadays especially, he is too apt to be one who, after brief hospital work of general character, or without this, takes up, as we say, the eye, ear, throat, or uterine organs. Unless he has had at some time a larger and more varied experience, or unless he is a most unusual man, he is prone at last to lose sight in his practice of the fact that eye, ear, and womb are parts of a complicated mechanism, and suffer through its general or local disorders. Hence the too common neglect of constitutional conditions, to which are often due the apparent maladies of the organs to which he devotes himself. Moreover, in certain of the organs of sense, as the eye, are frequently seen the very first signals of spinal or other maladies, and if, as too often happens, he sees in some such sign or symptom only the evidence of a local trouble, and neglects to look or reason beyond it, he may inflict on his patient

the gravest penalties, by depriving him of the chance of early treatment of some serious disease, involving lifelong, or even fatal, consequences. This is a criticism on the man and his training, not on the system of specialties which has become invaluable.

A reasonable desire to seek aid from physicians of usefully limited values is another test of the good family physician. I know of men who are in the habit of saying that they dislike consultations and get little good from them. As compared to those who too commonly subject people to the expense of fresh advisers, they are the more dangerous class. Apt enough in cases of acute disease to bring into the case some one to share responsibilities which seem grave because near at hand, they continue to treat chronic cases they do not understand, because there is no crisis of pain, disability, or danger to bring them to reason.

Hitherto I have dealt most with the intellectual outfit needed for the best practice of medicine, but the criticism I have just made brings me on more delicate ground. The man who feels himself so competent that his self-esteem forbids him to seek advice when he knows and

must know he has come to the end of his reasonable resources, lacks the humility which belongs to larger natures, and he, too, is a man to avoid.

Be sure that the physician cannot be a mere intellectual machine. None know that better than we. Through all ages we have insisted that he shall feel himself bound by a code of moral law, to which, on the whole, he has held without question, while creeds of more serious nature were shifting and changing. What the Greek fathers of medicine asked of him we still ask of him to-day. He must guard the secrets wrung from you on the rack of disease. He is more often than he likes a confessor, and while the priest hears, as I have once said, the sins and foibles of to-day, he is as like as not to have to hear the story of a life. He must be what About calls him, "*Le tombeau des secrets*,"—the grave of secrets. How can he be too prudent or too close-mouthed? Honor you must ask of him, for you must feel free to speak. Charity you should expect from him, for the heart is open to him as it is to no other, and knowledge, large knowledge, is the food which nourishes charity in the tender-hearted. In the



tender-hearted? How can he be that? All his days he has walked amidst misery, anguish, bodily and mental suffering. Be careful when you come to test him by his ability to feel what you call sympathy. In its loftiest meaning this is the capacity to enter into, to realize, and hence to feel with and for you. There is a mystery about this matter. I know men who have never suffered gravely in mind or body, who yet have some dramatic power to enter into the griefs of others, and to comprehend, as if by intuition, just what others feel, and hence how best to say and do the things which heal or help. I know others, seemingly as tender, who, with sad experience to aid them, appear to lack the imaginative insight needed to make their education in sorrow of use to their fellows. There are times when all that men can give of sympathetic tenderness is of use. There are others when what you crave is but the outcome of morbid desires for some form of interested attention. You may ask too much, and every doctor knows how curiously this persistent claim for what you call sympathy does, as the nurses say, "take it out of a doctor." The selfishness of nervous women sometimes exceeds belief in

its capacity to claim pity and constancy of expressed sympathy.

In times of more serious peril and suffering, be assured that the best sympathy is that which calmly translates itself into the desire to be of practical use, and that the extreme of capacity to feel your woes would be in a measure enfeebling to energetic utility. This it is which makes a man unfit to attend those who are dear to him, or, to emphasize the illustration, to medically treat himself. He goes to extremes, loses judgment, and does too much; fears to hurt, and does too little. I once saw a very young physician burst into tears at sight of a burnt child, a charming little girl. He was practically useless for the time. And I have known men who had to abandon their profession on account of too great sensibility to suffering.

There is a measure of true sympathy which comes of kindness and insight, which has its value, and but one. Does it help you over the hard places? Does it aid you to see clearly and to bear patiently? Does it truly nourish character, and tenderly but firmly set you where you can gain a larger view of the uses of pain and distress? That is the truest sympathy. Does

it leave you feebler with mere pity? Does it accentuate pain and grief by simply dwelling on it with barren words? I leave you to say what that is. We have a certain gentle disrespect among us for the doctor who is described as, oh! so sympathetic,—the man who goes about his work with a pocket-full of banal phrases calculated to soothe and comfort the cravings of the wretched. The sick and feeble take gladly these imitation crumbs cast from the full table of the strong. But sometimes people of firm character revolt at such petty and economical charity. I heard a vigorous old Quaker lady say once, after a consultation, “Thee will do me a kindness not to ask me to see that man again. Thee knows that I don’t like my feelings poulticed.”

The question of the truthfulness of physicians is one often raised. It troubles the consultant far more than it does the family doctor, and perhaps few who are not of us understand our difficulties in this direction. Every patient has his or her standard of truth, and by it is apt to try the perplexed physician. Some of the cases which arise are curiously interesting, and perhaps nowhere better than in the physician’s office or at the bedside do we see sharply developed the

peculiarities of character as to this matter of truth in many of its aspects. There is the patient who asks you to tell him the whole truth as to his case. Does he really want to know? Very often he does not. If you tell him, you sentence him. You do not shorten his life, you only add to its misery. Or perhaps his wife has written to you, "On no account tell my husband that he cannot get well. He dwells now on every sign of failing health, and you will make him wretched." You parry his question and try to help him. If he is resolute, he returns on you with a query so positive that you must answer frankly. His wife was right. You have done him an injury. There is the other man who insists at the start that you must on no account tell him if he cannot get well. You inform some relative of his condition. But perhaps he ought to know. He contemplates some work or travel which he should not undertake. You say so, and he replies, "But you have not told me that I am seriously ill." Such is sick human nature.

The people who really want to know if they will die of some given disease are few in number. Those who pretend they want to know are more

common. Those who should not know are frequent enough, and among them one is troubled to do what seems right and to say in answer to their questions what is true.

Wise women choose their doctors and trust them. The wisest ask the fewest questions. The terrible patients are nervous women with long memories, who question much where answers are difficult, and who put together one's answers from time to time and torment themselves and the physician with the apparent inconsistencies they detect. Another form of trouble arises with the woman whose standards are of unearthly altitude. This is the woman who thinks herself deceived if she does not know what you are giving her, or who, if without telling her you substitute an innocent drug for a hurtful one which she may have learned to take too largely, thinks that you are untruthful in the use of such a method. And you would indeed be wrong if you were of opinion that to tell her the whole truth, and invite her to break the habit by her own act, were available means. I certainly do not think that you have any right (indeed, I would not even discuss this) to take active means to make her think she is taking, say opium, when

you are only giving her something which tastes like it. If she asks, you must answer. But she may not, or does not, and yet when she is well again and learns that the physician preferred to act without her knowledge because he distrusted her power to help, she is very likely, if she chance to be a certain kind of woman, to say that he has been untruthful. Happily, such cases must be rare, and yet I know of some which have been the source of much annoyance to sensitive men. Thorough trust and full understanding is the way to avoid such difficulties. A nervous woman should be made to comprehend at the outset that the physician means to have his way unhampered by the subtle distinctions with which bedridden women are apt to trouble those who most desire to help them.

I omitted above an allusion to the most unpleasant inquirers, those who are either on the verge of insanity or are victims of that singular malady, hypochondriasis. A patient clearly staggering to and fro on the border line of sanity consults you. Here is a wilful, terrified being, eager to know the truth. "Am I becoming insane? Will I end in an asylum?" How can you answer? You see clearly, are sure

the worst is coming. What shall you do with this morbid, scared, obstinate child-man? You put aside his questions, but you have here a person quite or nearly sane to-day, resolute to hear, afraid to learn the truth he dreads. I leave my reader with this patient, and my stated knowledge and my shifted responsibility. "Doctor, if I am going to be insane, I will kill myself." Good reader, pray dispose of this case. Or take the case of a confirmed hypochondriac. He is miserable, has a hundred ailments, watches the weather, studies the barometer, has queer delusions as to diets, clothes, and his own inability to walk. The least hint of a belief that he is not as well as he was a week ago, or even a too close examination, leaves him with a new malady, and he, too, is a sharp questioner. As a rule, he has no perceptible changes in his tissues. But if he has some real malady,—it may be a grave one on which he has built a larger sense of misery than there was need for, and the case is common enough,—how shall you answer him? It is a less difficult case than the other, and I gladly leave him also to my consultant reader's acquired knowledge and to his personal sense of the value of truth.

Physicians are often blamed for not sooner warning a family of the fact that, in some case he and it are anxiously watching, death is inevitable. As to this the doctor has very mingled feelings. Sometimes he lacks courage, sometimes he is not sure enough to speak. A weak man fears that he will lose his patient and some quack be called in, and thus lessen the little chance yet left. Most of us can recall painful interviews in which a relative insisted on a definite opinion, which we were unable to give. As to cases where there is little or no doubt left, perfect frankness should be, and is, I think, our rule, but no one knows better, or as well as we, how numberless are the chances of escape for cases which seem to be at their worst. Hence a part of the reluctance the physician has to pronounce a verdict of fatal character.

There is another matter of moment as to cases known to be hastening to a fatal conclusion. The responsibility of withholding this knowledge from the patient is usually shifted on to the shoulders of relatives or friends. The medical adviser reports to them his opinion and leaves with them the power to act.

He is often asked if to know that death seems



certain makes less the chance of recovery or shortens the lessening number of the days of life yet left. It has often fallen to my sad lot, as to that of many of my medical brothers, to have to tell a patient that he is to die. Some isolated man asks it. Some lonely hospital patient has just reasons for knowing early or late in his disease the truth as the doctor sees it. I have never been able to feel certain that in any case of acute or hopeless illness to know surely what lay before a sick man did distinctly shorten his life. I have seen many people in apparent health made ill by the shock of emotion,—by fear, grief, anger, jealousy. Diseased persons feel less, or show less in a physical way, the results we might expect to see from even the most rudely conveyed intelligence as to their probable future.

It was not my wish to enter into a long discussion of all the qualities which go to make up the ideal physician. I desired chiefly to consider his principal needs, to point out in his defence certain of his embarrassments, and to leave the reader with some sense of help towards knowing whether his adviser was such as he should be in the more important qualities which go to make the true physician. There are other

and minor matters which are not without their relative gravity in his life. Some are desirable but not truly essential, and yet help or hurt him much. Whether he is gentle and well-mannered, is socially agreeable, or as to this negative, influences much the choice of the woman on whom, as a rule, comes finally the decision of who her family physician shall be. Too often she is caught by the outside show of manners, and sets aside an abler and plainer man, who has more really the true manners of the heart, yet lacks the power to make himself pleasant. Desirable it is, of course, to be what so many of the best physicians have been, refined and tactful gentlemen, and also charming companions. But a man may be a most competent, clear-headed, honest, scrupulously careful doctor, and yet be plain, ill-dressed, and uninteresting, and all this it is as well to understand. The mass of professional opinion is not so easily pleased as are individual patients. It decides pretty early in any large community, and classifies its members accurately, reversing very often the verdict of the juries of matrons, who do so much to make or mar our early fates. Soon or late it sifts the mass, knows who are the thor-

ough, trustworthy, competent, hard-headed practitioners, who are the timid, who the too daring, who ride hobbies, and who trust too much to drugs. Soon, too, it distinguishes those on whom it can call in emergencies, and the highest class of men who have the great gift of discovery and the genius of observation.

From the public we can look for no such justice, and our professional manners forbid us to speak of our brethren, save among ourselves, with perfect freedom. As a profession, it is my sincere conviction that in our adherence to a high code of moral law, and in the general honesty with which we do our work, no other profession can be compared with ours. Our temptations, small and large, negative and positive, are many and constant, and yet I am quite sure that no like group of men affords as few illustrations of grave moral weaknesses. It is commonplace to say that our lives are one long training in charity, self-abandonment, all forms of self-restraint. The doctor will smile at my thinking it needful to even state the fact. He begins among the poor; all his life, in or out of hospitals, he keeps touch of them always. He sells that which men can neither weigh nor measure,

and this sets him over all professions, save one, and far above all forms of mere business. He is bound in honor to profit by no patent, to disclose all he has learned, and to give freely and without reward of his best care to all others of his profession who may be sick. What such a life makes of a man is largely a question of original character, but in no other form of occupation is there such constant food useful to develop all that is best and noblest.

Popular opinion has been prone to decide that the physician who is anything else than this is a person not to be trusted. The old axiom is too often quoted as concerns us, "Jack of all trades, master of none." But there are enough men who have the power to be master of many trades and passed master of one. It is a question of applicative energy. Few men in early life can do much more than is needed to learn our art and its sister sciences; but, as time goes on, there are many who can add to it other pursuits which greatly benefit them in a wide sense, and enlarge and strengthen their mental powers, or pleasantly contribute to the joys of life, and so even to the growth of a man's moral nature. The wise physician, who is fond of etching or

botany, the brush or the chisel or the pen, or who is given to science, does well to keep these things a little in the background until he is securely seated in the saddle of professional success. Then usually he may feel free to reasonably follow out his tastes, and to write, or in any other way insist on freedom to use or make public his results. If only he has the competent fund of persistent industry to draw upon, he will be not the worse, but the better, physician for such enlargement of his pursuits as I refer to, for we may feel sure that in my profession there is room for the direct or indirect use of every possible accomplishment.

## CONVALESCENCE.

---

TO my mind, there is nothing more pleasant than the gradual return to health after some revolutionary disease which has removed a goodly portion of the material out of which is formed our bodily frame. Nature does this happy work deftly in most cases, where, at least, no grave organic mischief has been left by the malady ; and in the process we get such pleasantness as comes always from the easy exercise of healthy function. The change from good to better day by day is in itself delightful, and if you have been so happy, when well, as to have loved and served many, now is the good time when bun and biscuit come back to you,—shapely loaves of tenderness and gracious service. Flowers and books, and folks good and cheery to talk to, arrive day after day, and have for you a new zest which they had not in fuller health. Old tastes return and mild delights

become luxuries, as if the new tissues in nerve and brain were not sated, like those of the older body in which they are taking their places.

When you are acutely ill, the doctor is business-like and gravely kind; you want him in a way, are even anxious to see him for the relief he may bring, or the reassurance. But when you begin to feel as if you were a creature re-born, when you are safe and keenly enjoying the return of health, then it is that the morning visit is so delightful. You look for his coming and count on the daily chat. Should he chance to be what many of my medical brothers are,—educated, accomplished, with wide artistic and mental sympathies,—he brings a strong, breezy freshness of the outer world with him into the monastic life of the sick-room. One does not escape from being a patient because of being also a physician, and for my part I am glad to confess my sense of enjoyment in such visits, and how I have longed to keep my doctor at my side and to decoy him into a protracted stay. The convalescence he observes is for him, too, a pleasant thing. He has and should have pride in some distinct rescue, or in the fact that he has been able to stand by, with little interference, and

see the disease run its normal course. I once watched a famous surgeon just after he had done a life-saving operation by dim candle-light. He stood smiling as the child's breath came back, and kept nodding his head with pleasant sense of his own competence. He was most like a Newfoundland dog I once had the luck to see pull out a small child from the water and on to a raft. When we came up, the dog was wagging his tail and standing beside the child with sense of self-approval in every hair. The man wagged his head; the dog wagged his tail. Each liked well what he had done.

Thus it is that these half-hours by the convalescent's couch are full of subtle flattery for the doctor, and are apt to evolve the social best of him, as he notes the daily gain in strength and color, and listens, a tranquil despot, to one's pleas for this freedom or that indulgence. He turns over your books, suggests others, and, trained by a thousand such interviews, is likely enough a man interesting on many sides.

You selfishly enjoy his visit, not suspecting that you, too, are ignorantly helpful. He has been in sadder homes to-day, has been sorely tried, has had to tell grim truths, is tired, mind



and body. The visit he makes you is for him a pleasant oasis: not all convalescents are agreeable. He goes away refreshed.

Most doctors have their share, and more, of illness, and are not, as I have seen stated, exempt from falling a prey to contagious maladies. Indeed, our records sadly show that this is not the case. Perhaps there is value for them and their future patients in the fact that they have been in turn patient and doctor and have served in both camps. Like other sick folks, the physician, as I know, looks forward, when ill, to the "morning visits" quite as anxiously as do any of those who have at times awaited his own coming.

That medical poet who has the joyous art of sending a ripple of mirth across the faces of the Anglo-Saxon world recognizes this fact in a cheerful poem, called "The Morning Visit," and to which I gladly refer any of my readers who would like to know from the lips of Oliver Wendell Holmes what manner of delightful patient he must have been. I can fancy that he lost for his doctor many a pleasant hour.

It has seemed to me as if this wonderful re-making and regrowing of the tissues might be

likened to a swift change from the weak childhood of disease to a sudden manhood of mind and body, in which is something of mysterious development elsewhere unmatched in life. Death has been minutely busy with your tissues, and millions of dead molecules are being restored in such better condition that not only are you become new in the best sense,—renewed, as we say,—but have gotten power to grow again, and, after your terrible typhoid or yellow fever, may win a half-inch or so in the next six months,—a doubtful advantage for some of us, but a curious and sure sign of great integral change.

The Greeks had a notion that once in seven years we are totally changed, the man of seven years back having in this time undergone an entire reconstruction. We know now that life is a constant death and a renewing,—that our every-day nutrition involves millions of molecular deaths and as many millions of births,—although to liken that which is so exquisitely managed, so undisturbingly done, to the coarser phenomena of death and birth is in a measure misleading.

Diseases such as typhoid fever, or a sharp local lung-trouble like pneumonia, really do make

these minute changes approximate in abruptness to death. You weigh, let us say, one hundred and eighty pounds, and you drop in three weeks of a fever to one hundred and thirty pounds. The rest of you is dead. You have lost, as men say, fifty pounds, but your debt to disease, or to the blunders of civilization, for it is a case of creditor behind creditor, is paid. Your capital is much diminished, but you have come out of the trial with an amazing renovation of energy. This is the happy convalescence of the wholesome man. The other, the unlucky, fellow, does not get as safely through the cleansing bankruptcy of disease. The vicious, unlucky, or gouty grandfather appears on the books of that court in mysterious ways; his sins are pathologically visited on his child's child in this time of testing strain.

In the happy rush towards useful health, of a convalescence undisturbed by drawbacks, it is pleasant to think, as one lies mending, of the good day to come when my friend, recovering from typhoid or smallpox, shall send for his legal adviser and desire him as usual to bring suit against the city for damages and loss of time.

A little girl coughed in my face a hideous

breath of membranous decay. I felt at once a conviction of having been hit. Two days later I was down with her malady. She herself and two more of her family owed their disease to the overflow of a neighbor's cesspool, and to them—poor, careless folk—Death dealt out a yet sterner retribution. There was a semi-civilized community beyond both. Should one go to law about it and test the matter of ultimate responsibility?

The amiability of convalescence is against it. One feels at peace with all the world, and so lies still, and reflects, "like souls that balance joy and pain," as to whether, on the whole, the matter has not had its valuable side. Certainly it has brought experiences not otherwise attainable.

Of the deeper and more serious insights a man gathers in the close approach of death and the swift, delicious return to safety and enlarging powers I hardly care to speak. To a physician, it is simply invaluable to have known in his own person pain, and to have been at close quarters with his constant enemy, and come off only wounded from the contest. In the anxiety about you is read anew what you look upon in other households every day, and perhaps with a too accustomed eye. And as to pain, I am almost

ready to say that the physician who has not felt it is imperfectly educated. It were easy to dwell on this aspect of convalescence, but the mental state of one on the way to health is not favorable to connected thought. It is more grateful to lie in the sun, at the window, and watch the snow-birds on the ice-clad maples across the way, and now and then, day after day, to jot down the thoughts that hop about one's brain like the friendly birds on the mail-clad twigs.

I make no apology for the disconnectedness of my reflections, but turn gladly to my records of the joyous and less grave observations which the passing hours brought me. Much as I have seen of disease and recoveries in all manner of men and women, the chance to observe them in my own person presented me with many little novel facts of interest. I find in my brief notes of this well-remembered time many records of the extraordinary acuteness won for a while by the senses.

Not dubious, but, alas! brief, is the gain which the sensorium acquires in this delightfully instructive passage out of death's shadow into certain sunshine. In my own case there was a **rapid exfoliation**, as we call it, of the skin, a loss

and renewal of the outer layer of the cuticle. As a result of this, the sense of touch became for a while more acute, and was at times unpleasantly delicate. This seemed to me, as I first thought of its cause, a mere mechanical result, but I incline to suspect now that it was in a measure due to a true increase in capacity to feel, because I found also that the sister sense of pain was heightened. Slight things hurt me, and a rather gentle pinch gave undue discomfort. No doubt a part of this was owing to my having taken a good deal of opium, and then abruptly laid it aside. As I have elsewhere stated, this is apt to leave the nerves oversensitive for a season. The sense of hearing seemed to me to be less wide awake. I did not hear better, but high notes were for a while most unpleasant. The sense of taste grew singularly appreciative for a time, and made every meal a joyful occasion. The simplest food had distinct flavors. As for a glass of old Madeira, —a demijohned veteran of many ripening summers,—I recall to this day with astonishment the wonderful thing it was, and how it went over the tongue in a sort of procession of tastes, and what changeful bouquets it left in my mouth,—a

strange variety of varying impressions, like the play of colors. In these days of more unspiritual health and coarser sense I am almost ashamed to say what pleasure I found in a dish of terrapin.

The function of smell became for me a source both of annoyance and, later on, of pleasure. I smelt things no one else could, and more things than I now can. The spring came early, and once out of doors the swiftly-flitting hours of sensory acuteness brought to me on every breeze nameless odors which have no being to the common sense,—a sweet, faint confusion of scents, some slight, some too intense,—a gamut of odors. Usually I have an imperfect capacity to apprehend smells, unless they are very positive, and it was a curious lesson to learn how intense for the time a not perfect function may become. Recent researches have shown that a drug like mercaptan may be used to test the limit of olfactory appreciation. We have thus come to know that the capacity to perceive an odor is more delicate than our ability to recognize light. Probably it is an inconceivable delicacy of the sense of smell more than anything else which enables animals to find their way in the manner which

seems to us so utterly mysterious. Yet, even in human beings, and not alone in a fortunate convalescence, do we see startling illustrations of the possibilities of this form of sensorial acuteness. I know of a woman who can by the smell at once tell the worn gloves of the several people with whom she is most familiar, and I also recall a clever choreic lad of fourteen who could distinguish when blindfold the handkerchiefs of his mother, his father, or himself, just after they have been washed and ironed. This test has been made over and over, to my satisfaction and surprise.

If a man could possess in the highest degree and in combination all of the possible extremes of sensory appreciativeness seen in disease, in hysteria, and in the hypnotic state, we should have a being of extraordinary capacities for observation. Taylor, in his "Physical Theory of Another World," a singular and half-forgotten book, has set this forth as conceivable of the beings of a world to come, and dwelt upon it in an ingenious and interesting way. For a long time even the inhalation of tobacco-smoke from a friend's cigar disturbed my heart, but one day, and it was, I fear, long before my physician, and he was wise, thought it prudent, I sud-



denly fell a prey to our lady Nicotia. I had been reading listlessly a cruel essay in the *Atlantic* on the wickedness of smoking, and was presently seized with a desire to look at King James's famous "counterblast" against the weed. One is like a spoiled child at these times, and I sent off at once for the royal fulmination, which I found dull enough. It led to results the monarch could not have dreamed of. I got a full-flavored cigar, and had a half-hour of worshipful incense-product at the shrine of the brown-cheeked lady,—a thing to remember,—and which I had leisure enough to repent of in the sleepless night it cost me.

This new keenness of perception, of taste and touch, of smell and sound, belongs also, in the splendid rally which the body makes toward health, to the intellectual and imaginative sphere of activities. Something of the lost gifts of the fairy-land of childhood returns to us in fresh aptitude for strange, sweet castle-building, as we lie open-eyed, or in power to see, as the child sees, what we will when the eyes are closed,—

Pictures of love and hate,  
Grim battles where no death is. Tournaments,  
Tall castles fair and garden terraces,

Where the stiff peacock mocks the sunset light,  
And man and maiden whisper tenderly  
A shadowy love where no heart ever breaks,—  
Love whose to-morrow shall be as to-day.

With the increase of intellectual clearness, within a certain range, come, as with the brightened senses, certain drawbacks, arising out of the fastidiousness which belongs to the changing man just at this time. Let him, therefore, be careful what novels he chooses, for of all times this is the one for fiction, when we are away from the contradictions of the fierce outer world, and are in an atmosphere all sun and flowers, and pleasant with generous service and thankful joy. Be careful what Scheherezade you invite to your couch. By an awful rule of this world's life, in all its phases, the sharper the zest of enjoyment, the keener the possible disgusts may be. I recommend Dumas's books at this crisis, but they should be read with acceptance; as stories, their value lying largely in this, that no matter who is murdered or what horror occurs, you somehow feel no more particular call upon your compassion than is made when you read afresh the terrible catastrophes of Jack the Giant-Killer.

A delightful master of style, Robert Louis Stevenson, in a recent enumeration of the books which have influenced him in life, mentions, as among the most charming of characterizations, the older Artagnan of the *Vicomte de Bragelonne*. I feel sure that on the sick-bed, of which he does not hesitate to speak, he must have learned, as I did, to appreciate this charming book. I made acquaintance then, also, with what seems to me, however, the most artistic of Dumas's works, and one so little known that to name it is a benefit, or may be, the *Chevalier d'Harmenthal*.

In the long road towards working health, I must have found, as my note-books show, immense leisure, and equal capacity to absorb a quantity of fiction, good and bad, and to find in some of it things about my own art which excited amused comment, and but for that would long ago have been forgotten. Among the stuff which I more or less listlessly read was an astonishing book called "*Norwood*." It set me to thinking, because in this book are recounted many things concerning sick or wounded folk, and those astonishing surgeons and nurses who are supposed to have helped them on to their feet again.

The ghastly amusement which came to me out of the young lady in this volume, who amputates a man's leg, made me reflect a little about the mode in which writers of fiction have dealt with sick people and doctors. I lay half awake, and thought over this in no unkindly critical mood,

“With now and then a merry thought,  
And now and then a sad one,”

until I built myself a great literary hospital, such as would delight Miss Nightingale. For in it I had a Scott ward, and a Dickens ward, and a Bulwer ward, and a Thackeray ward, with a very jolly lot of doctors, such as Drs. Goodenough and Firmin, with the Little Sister (out of Philip) and Miss Evangeline to take care of the patients, besides cells for Charles Reade's heroes and heroines, and the apothecary (out of Romeo and Juliet) to mix more honest doses than he gave to luckless Romeo.

Should you wander with a critical doctor through those ghostly wards, you would see some queerer results of battle and fray than ever the doctors observe nowadays,—cases I should like to report, it might be: poisonings that would have bewildered Orfila, heart-diseases

that would have astounded Corvisart, and those wonderful instances of consumption which render that most painful of diseases so delightful to die of—in novels. I have no present intention to weary my readers with a clinic in those crowded wards, but it will ease my soul a little if I may say my say in a general fashion about the utter absurdities of most of these pictures of disease and death-beds. In older times the sickness of a novel was merely a feint to gain time in the story or account for a non-appearance, and the doctor made very brief show upon the stage. Since, however, the growth of realism in literary art, the temptation to delineate exactly the absolute facts of disease has led authors to dwell too freely on the details of sickness. So long as they dealt in generalities their way was clear enough. Of old a man was poisoned and done for. To-day we deal in symptoms, and follow science closely in our use of poisons. Mr. Trollope's "Gemma" is an instance in point, where every one will feel that the spectacle of the heroine going seasick to death, owing to the administration of tartar emetic, is as disgusting and inartistic a method as fiction presents. Why not have made it croton oil? More and worse of this

hideous realism is to be found in About's books, such, for instance, as "Germaine"; but from which censure I like to exclude the rollicking fun of "Le Nez d'un Notaire." As to the recent realistic atrocities of Zola, and even of Tolstoi, a more rare sinner, if we exclude his disgusting drama of peasant life, I prefer to say little.

As to blunders in the science of poisons I say little. The novelist is a free lance, and chooses his own weapons; but I cannot help remarking that, if recent investigators are to be trusted, one unlucky female, at least, must be still alive, for a novelist relates that she was done to death by the internal taking of a dose of rattlesnake venom. I hope when I am to be poisoned this mode may be employed. She might as well have drunk a glass of milk. That book was a queer one to me after this catastrophe: the woman ought to be dead and could not be.

The difficulty of the modern novelist in giving symptoms and preserving the entire decorum of his pages has amused me a little. Depend upon it, he had best fight shy of these chronic illnesses: they make queer reading to a doctor who knows what sick people are; and above all does this advice apply to death-beds. As a

rule, folks get very horrible at such times, and are a long while in dying, with few of their wits about them at the last. But in novels people die marvellously possessed of their faculties; or, if they are shot, always jump into the air exactly as men never do in fact.

Just here, concerning wounds, a question occurs to me: The heroes who have to lose a limb—a common thing in novels since the war—always come back with one arm, and never with a lost leg. Is it more romantic to get rid of one than of the other?—considering also that a one-armed embrace of the weeping waiting lady-love must be so utterly unsatisfactory.

But enough of the patients. Among them I think I like Pendennis the best, and consider little Dombey and Nell the most delightfully absurd. And as to the doctors. Some of them have absolutely had the high promotion to be the heroes of a whole book. Had not one, nay, two, a novel to themselves? There is delightful Dr. Antonio, not enough of a doctor to call down on him my professional wrath. As to Dr. Goodenough, he has been in our family a long while,—on the shelf (God bless him!),—and attended, we remember, our friend Colonel Newcome in that

death-bed matchless in art since Falstaff babbled life away. Yet, after all, he is not a doctor so much as a man charmingly drawn.

There are in novels many good portraits of lawyers, from Pleydell to Tulkinghorn. Whether fair or unjust as pictures, I am scarce able to judge, although I believe that some of them have been recognized by our legal brethren as sufficiently exact. While, however, we have plenty of characters which for his purpose the novelist labels M.D., there seems to have been some insuperable difficulty in evolving for artistic use a doctor who shall seem at home, as such, among the other characters of the novel,—one, at least, who shall appear to any reasonable degree like a doctor to those who really know the genus doctor thoroughly. Save Lydgate, no doctor in fiction answers this critical demand, or seems anything to me but a very stiff lay figure from the moment he is called upon to bring his art into the story, or to figure, except as an unprofessional personage.

Nor does this arise from poverty of types in the tribe of physicians. The training of a doctor's life produces the most varied effects for good or evil, as may chance, upon the human



natures submitted to its discipline, so that I think any thoughtful medical man will tell you that there is a more notable individuality among his brethren in middle life than among most of the people he encounters. As for the novelist's effort—an inartistic one, it seems to me—to bring on his stage representations of some especial kind of doctor, I have only a grim smile to give, remembering Mr. Reade's grewsome medico in "Hard Cash,"—a personation meant, I suppose, to present to the public a certain irregular London doctor, but which, to the minds of most physicians, reads like an elaborate advertisement of the man in question.

Sir Bulwer Lytton's renderings of a homœopath and a water-cure specialist are open to the same charge, and could only have been successful in the hands of a master.

There are at least two doctors in Balzac's novels. Rastignac, man of fashion and science, is drawn with the master's usual skill, but he is not a doctor. His art has no prominence. It is not shown how his peculiarities influenced his work, nor how his art, and its use, altered or modified the man. "The Country Doctor," by the same strong hand, is far more near my ideal of what

this portraiture should be than any other known to me in French literature. The humorous aspects of a medical life in the provinces of France are nicely handled in Jules Sandeau's "Doctor Herbeau," but the study, however neat and pleasing, is slight.

Wander where you may, in the drama or the novel, you will still find, I think, that the character of the physician awaits in its interesting varieties competent portrayal.

Shakespeare has left us no finished portrait of a doctor. Molière caricatured him. Thackeray failed to draw him, and generally in novels he is merely a man who is labelled "Doctor." The sole exception known to me is the marvellous delineation of Lydgate in "Middlemarch." He is all over the physician, his manner, his sentiments, his modes of thought, but he stands alone in fiction. How did that great mistress of her art learn all of physicians which enabled her to leave us this amazingly truthful picture? Her life gives us no clue, and when I asked her husband, George Lewes, to explain the matter, he said that he did not know, and that she knew no more of this than of how she had acquired her strangely complete knowl-

edge of the low turf people she has drawn in the same book, and with an almost equal skill and truth to nature.

It were easy, I fancy, to point out how the doctor's life and training differ from those of all the other professions, and how this must act on peculiar individualities for the deepening of some lines and the erasure of others; but this were too elaborate a study for my present gossiping essay, and may await another day and a less lazy mood.

If any one should be curious to see what are the modifying circumstances in a physician's life which strongly tend to weaken or to reinforce character, I recommend a delightful little address, quite too brief, by Dr. Emerson, the son of the great essayist. It is unluckily out of print and difficult to obtain. If you would see in real lives what sturdy forms of personal distinctness the doctor may assume, there is no better way than to glance over some half-dozen medical biographies. Read, for instance, delightful John Brown's sketch of Sydenham and of his own father, or George Wilson's life of John Reid, the physiologist, whom community of suffering must have made dear to that gentle intelligence, and

whose days ended in tragic horror such as sensational fiction may scarcely match; or, for an individuality as well defined and more pleasing, read Pichot's life of Sir Charles Bell, or one of the most remarkable of biographies, Mr. Morley's life of Jerome Cardan.

I am reminded as I write how rare are the really good medical biographies. The autobiographies are better. Ambrose Paré's sketches of his own life, which was both eventful and varied, are scattered through his treatise on surgery, and he does not gain added interest in the hands of Malgaigne. Our own Sims's book about himself is worth reading, but is too realistic for the library table, yet what a strangely valuable story it is of the struggle of genius up to eminent success. But these are the heroes of a not unheroic profession, and I had almost forgotten to set among them, as a study of character, the life of the tranquil, high-minded Jenner, the country doctor who swept the scars of smallpox from the faces of the world of men, and beside him John Hunter, his friend, impulsive, quick of temper, enthusiastic, an intensely practical man of science. These are illustrations of men of the most varied types, whose works

show their characteristics, and who would, in the end, I fancy, have been very different had fate set them other tasks in life, for if the sculptor makes the statue, we may rest quite sure that the statue he makes influences the man who made it.

These, I have said, are our heroes, but I still think there remains to be written the simple, honest, dutiful story of an intelligent, thoughtful, every-day doctor, such as will pleasantly and fitly open to laymen some true conception of the life he leads, its cares, its trials, its influences on himself and others and its varied rewards. John Brown got closest to it in that sketch of his father, and in her delicately-drawn "Country Doctor" Miss Jewett has done us gentle service. But my doctor would differ somewhat in all lands, because nationality and social conventions have their influence on us as on other men, as any one may observe who compares the clergymen of the Episcopal Church in America with those of England.

The man who deals with the physician in fiction would have to consider this class of facts, for social conventions have assigned to the physician in England, at least, a very different position

from that which he holds with us, where he has no social superior, and is usually in all small communities, and in some larger ones, the most eminent personage and the man of largest influence.

In the rage for novel characters the lady doctor has of late assumed her place in fiction. Lots of wives have been picked up among hospital nurses, especially since the Crimean war, and since other women than Sisters of Charity got into the business, and so made to seem probable this pleasing termination of an illness. There was a case well known to me where a young officer simulated delirium tremens in order to get near to a Sister of Charity. If ever you had seen the lady, you would not have wondered at his madness; and should any author desire to utilize this incident, let him comprehend that the order of Sisters of Charity admits of its members leaving the ranks by marriage, theirs being a secular order; so that here are the chances for a story of the freshest kind. As for the lady doctor in fiction, her advantages would be awful to contemplate in sickness, when we are weak and fevered, and absurdly grateful for a newly-beaten pillow or a morsel of ice. But

imagine the awful temptation of having your heart auscultated. Let us dismiss the subject while the vision of Béranger's Ange Gardienne flits before us as De Grandville drew her.

I have not now beside me Howells's "Doctor Breen's Practice." It is a remarkable attempt to do justice to a very difficult subject, for there are two physicians to handle, male and female, not, I think, after their kind. "Doctor Zay," by Miss Phelps, makes absurd a book which is otherwise very attractive. This young woman doctor, a homœopath, sets a young man's leg, and falls in love with him after a therapeutic courtship, in which he woos and she prescribes.

The woman doctor is, I suspect, still available as material for the ambitious novelist, but let him beware how he deals with her.

## PAIN AND THE OPIUM HABIT.

---

AS I look from my window, on the lawn below are girls at play,—gay, vigorous, wholesome; they laugh, they run, and are never weary. How far from them and their abounding health seem the possibilities of such torment as nature somewhere in life reserves for most of us. As women, their lives are likely, nay, certain, to bring them a variety of physical discomforts, and perhaps pain in its gravest forms. For man, pain is accidental, and depends much on the chances of life. Certainly, many men go through existence here with but little pain. With women it is incidental, and a far more probable possibility. The most healthy will have least of it. Vigor of body is its foe. Thin blood is its ally. Speaking now, not of the physiological pain, which few escape, but of the torments of neuralgia and the like, Romberg says, “Pain is the prayer of the nerves for



healthy blood." As the woman is normally less full-blooded than the man, she is relatively in more danger of becoming thin-blooded than he.

Moreover, the disturbances which come from the nature of her physiological processes subject her to larger risks of lessened blood than man, and hence, for all reasons, she is more likely than he to become anæmic, and out of this to evolve pain in some shape.

If we see that our girls are not overtasked at the age of sexual evolution, that the brain is not overtrained at bitter cost of other developments as essential, we escape a part of this peril. To discuss the question here is not my intention. To secure in our artificial life what is desirable is difficult. It involves matters of dress, exercise, proportion of lessons, diet, and other matters, of which I shall yet say something, and as to which I have elsewhere said a good deal.

But no matter how careful we may be, how thoughtful as to the true needs of these young lives, we may be sure that our daughters will be more likely to have to face at some time the grim question of pain than the lads who grow up beside them.

For both there are always the little ailments

of childhood,—the hurts, the accidents, and the disorders or the diseases of youthful years. All come in for a share. Let us be careful how we deal with them. I have often watched with interest a mother beside the girl or boy in temporary pain. As a rule, she assumes from the beginning that the hurt boy is to be taught silent, patient endurance. What! you, a boy, to cry! Be a man! Among his comrades he is a “cry-baby” if he whimpers, “a regular girl,” “a girl-boy.” He is taught early that from him endurance is expected; the self-conquest of restrained emotion is his constant lesson.

If it be a girl who suffers, she is assumed to be weak, and it is felt that for her tears are natural and not to be sternly repressed; nor are her little aches and complaints dismissed as lightly as are her brother's. She is trained to expect sympathy, and learns that to weep is her prerogative. The first gush of tears after a hurt of body or mind is in some mysterious way a relief, and not rudely to be chidden; but, on the whole, it is wise and right to teach patience and unemotional endurance to the sex which in life is sure to have the larger share of suffering. To be of use, this education must begin reason-

ably early, and we may leave to the mother to make sure that it is not too severe.

As a girl grows older, we ask and expect some measure of restraint in emotional expression as regards any of the physical or moral troubles which call out tears in the child; for the woman who is wise understands that unrestrained emotion and outward expressions of pain or distress are the beginnings of that loss of self-rule which leads to habitual unrestraint, and this to more and more enfeeblement of endurance, and this, again, to worse things, of which more in the future.

We are dealing now with pain. My simple practical thesis is that pain comes to all soon or late, that the indirect consequences are most to be feared, and that endurance in the adult, rational endurance, must be won by a gradual education, which can hardly begin too early. But of what use are these stern lessonings in the bearing of what none can quite escape? Do they enable us to diminish pain or to feel it less? Indirectly, yes. One woman cries out for instant easement if in pain or distress, unschooled to endure. She claims immediate relief. Another, more resolute, submits with

patience, does not give way, as we put it, tries to distract her attention, knowing that even as distinct suffering as toothache may be less felt in the presence of something which interests the mind and secures the attention. Nothing, indeed, is more instructive than to watch how women bear pain,—the tremendous calamity it is to one, the far slighter thing in life it is to another. I speak now of transient torments. When we come to consider those years of torture which cruel nature holds in store for some, no one blames the sight of the moral wreck it is apt to make of the sufferer. On the other hand, there is nothing I ever see in my profession so splendid as the way in which a few, a rare few, triumph over pain, which we know must often rise to the grade of anguish, and from which scarce a day is ever free.

I recall well one woman who for years, under my eyes, was the subject of what, with due sense of the force of the word, I call torture. At times she shut herself up in her room, and, as she said, “wrestled with it.” This happened every day or two for an hour or more. The rest of the time she was out, or busy with her duties, but always in some pain. Meanwhile, although fail-

ing slowly, she was the life and joy of many, the true and gentle counsellor, the sure support of all who leaned on her for aid. At her dinner-table, in chat with friends, or over a book, no one who did not know her well could have dreamed that she was in such pain as consigns lower natures to disability. Her safeguard from utter wreck was a clear and resolute faith, a profound and unfailing interest in men and things and books, which gave strange vigor to her whole range of intellectual activities. But above all she possessed that happiest of gifts, the keen, undying sense of the humorous, the absurd, the witty. As she once said, "All life laughs for me." It followed her to death, as it has certain others as noble. When dying, she said some gay thing which disturbed a dear friend. The sufferer, well knowing her own state, looked up. "I must laugh, dear," she said; "I would not feel that the other world was the good place I think it if I did not believe I could laugh there too." She once said to me, in the midst of a storm of acute suffering, that pain seemed to her a strange sort of a joke. I hardly knew what she meant, but it shows the reigning mood of **one** who used to better ends a life half pain

than most of us use the untroubled health of existence. Very irritable in youth, her clear brain and strong sense of duty overcame it in proportion to the growth of what in others creates it. All opiates she disliked, and could rarely be induced to take them. "If my mind gets weaker, I shall go to pieces——;" and, laughing always, "the bits would be worthless as the scattered bricks of a sound house." Surely such a life is a fruitful lesson in the uses of endurance, for be sure that both she and all around her were the better and happier, yes, and she the less a sufferer, for her mode of dealing with a life of pain.

The illustration I have given saves me from dwelling at great length on the values of all the means within a woman's control for lessening the evil consequences of suffering, and if to few is given the largest moral and mental outfit for such a struggle, none are without the power to cultivate what they have, and, in the lesser ills of life, to make use of the lesson we may hope and know few will be called on to apply to an existence such as hers.

Pain of body, hurt of mind, all the sad gamut from discomfort to anguish, depend for

their influence on her life upon how nature and training enable the woman to meet them.

To endure without excess of emotion saves her from consequent nervousness, and from that feebleness of mind and body which craves at all cost instant relief. It is the spoiled child, untaught to endure, who becomes the self-pampered woman. Endurance of pain has also its side-values, and is the handmaid of courage and of a large range of duties. Tranquil endurance enables the sufferer to seek and to use all the means of distraction which this woman I have described did use. It leaves the mind free, as it never can be otherwise in the storm of unrestraint, to reason on her troubles, and to decide whether or not her pain justifies the use of drugs, for on her the physician must measurably rely for this knowledge, and as she is morally strong or weak the decision will be.

There are those, indeed, who suffer and grow strong; there are those who suffer and grow weak.

This mystery of pain is still for me the saddest of earth's disabilities. After all is said that can be said on its values as a safeguard, an indi-

cator of the locality of disease, after the moralist has considered it from the disciplinary view, and the theologian cracked his teeth on this bitter nut, and the evolutionist accounted for its existence, it comes at last to the doctor to say what shall be done with it. I wish it came to him alone. Civilized man has ceased to torture, but nature, relentless still, has in store possibilities of utmost anguish, which seem to fall alike on the guilty and the innocent, the poor and the rich, and in largest proportion on the gentler sex. But while pain is still here with its ever-ready presence, the direct means of lessening it have multiplied so that hardly a month goes by without some new method being added of destroying for a time the power to suffer. For, bear in mind that it is not usually the cause which can be at once destroyed by drugs, but only the bodily capacity to react to it in the fashion we call pain. Ether, chloroform, cocaine, and many other drugs enable us to-day to feel sure that the mass of real pain in the world is vastly less than it was. It is, indeed, possible to prevent all pain, and pain has no real value which we need respect and desire to preserve; at least this is so from the physician's stand-point.



The temptation which comes to us out of the accumulation of anæsthetic agents is one which every tender-hearted man can understand. The temptations which it presents to the suffering they only know who have suffered. To this all that I have said leads up. To most women, even to strong women, there comes a time when pain is a grim presence in their lives. If brief, the wise physician calls upon them for that endurance, of the value of which I have spoken. On some he calls in vain. Even if it recur at intervals, as in the shape of neuralgic headaches, in the name of reason let him be the sole judge of your need to be relieved by drugs. He well knows, as you cannot know, that the frequent use of morphia seems in the end to increase, not to lessen, the whole amount of probable future pain, and that what eases for a time is a devil in angelic disguise. If you are urgent, weak of will, unable through unrestraint to comprehend him, the fault will be only half his, if you plead too eagerly for help and too constantly claim the relief he holds.

But suppose that the woman I address is a long and true sufferer, and that the physician desires to use such help often, then comes her

time of peril and his day of largest responsibility. If he be weak, or too tender, or too prone to escape trouble by the easy help of some pain-lulling agent, she is soon on the evil path of the opium, chloral, or chloroform habit. Nor is prevention easy. With constant or inconstant suffering comes weakness of mind as well as body, and none but the strongest natures pass through this ordeal of character unhurt. If the woman be unenduring and unthoughtful, if the doctor fail to command her faith, and be too sympathetic, at last she gets possession herself of the drug, or the drug and the hypodermatic needle. Then there is before her one of the saddest of the many downward paths which lead to destruction of body and soul.

More often, in my experience, the opium habit is learned during an illness of limited duration, and for the consequences of which there is always some one to be blamed.

As I remember these patients, and I have seen them by the score, far on in their evil ways, such women are most often those who lack the power, even in health, to endure pain. Some defect of training or of nature has made

pain, or even distress or insomnia, ills to be relieved at once regardless of cost. Let them but feel that relief for the time is possible, and self-restraint is over. They will have the thing they crave. You cure them of the vile opium habit at awful cost of suffering, and they relapse on the first new trial of endurance, and men of their type more surely than women.

I see a good many cases of opium, morphia, or chloral habit, and I am sure that these forms of intoxication are becoming more prevalent than they were a generation ago. Is this due to an increase in the disorders which are eased by such drugs? Is it not rather due to the softening influence of luxury, and the fact that we are all being constantly trained to feel that it is both easy and our right to escape pain, however brief?

I am sure, too, that a part of it lies in the readiness with which many physicians give sedatives, and their failure to feel the vast moral responsibilities of their position. But, whatever be the cause or causes, it is well in the hour of ease to learn beforehand the risks which come of too easy and too frequent appeals to agents which benumb the nerves.

When people are first given opium, it is apt to be the friend of the night and the foe of the morrow. Repeated often enough, it loses power to constipate and distress. It still soothes pain. It still gives sleep. At last it seems to be in a measure a tonic for those who take it. But after a while it does some other things less agreeable. The mind and memory suffer, but far more surely the moral nature is altered. The woman becomes indifferent, her affections dull, her sense of duty hopelessly weakened. Watchful, cunning, suspicious, deceitful,—a thief, if need be, to get the valued opiate,—she stops at nothing. It would seem as if it were a drug which directly affected the conscience. At last, before this one craving, all ties in life are slight and bind her not. Insensible to shame and dead to affection, she is happy if the alcohol habit be not added to her disorder, for if she cannot get the one drug she longs for, the other will serve her at need.

There is a popular idea that opium gives pleasant dreams, and that it takes us away into the land of poetry, to which it is supposed to have conducted Coleridge and De Quincey. As a matter of fact, there are but few persons who

get more out of opium than relief of pain, sense of comfort, and next day's remorse. The opium dream is not for all. I have known only four or five cases of habitual and distinct opium dreamers. There was more of Coleridge than of opium in "Kubla Khan," and more of De Quincey than of the juice of poppies in the "Vision of Sudden Death." When it came to the telling of these immortal dreams, we may well suspect that the narrative gained in the literary appeal from the poet opium-drunk to the poet sober.

It is, I fancy, well known to physicians that opium may act on an individual differently at different times. In the case of one well known to me it usually causes sleep, and no longer gives rise to nausea the next day, as it once did. Although it leaves him sufficiently wretched, and he has taken it but rarely, the drug occasionally keeps him wide awake and delightfully indifferent to the passage of time. The striking hours are heard, and that is all. There is none of the ennui of insomnia. This effect of morphia is rare with him. He may have taken morphia a dozen times in his life to ease acute pain, but only twice has it made him

thus wakeful. On these nights he saw an endless succession of visions, which he did not forget, as one does common dreams. Nearly all of the hallucinations were of the most amusing character, and were often long and connected series of ludicrous situations, over which he wondered, as he lay next day, a victim to the secondary miseries due to the soothing dose of the night before. This is one of the tricks which drugs play, and is not a thing to be anticipated. The drug is the same; the man varies, and with his variations arise peculiarities in the effects of remedies.

The excess sometimes attained in the use of opiates is almost past belief. I have seen a mere girl of seventeen years take at one dose thirty grains of morphia, and I know of a woman who took for years ninety grains a day, and ruined a weak husband, a man of small means, by the costliness of her habit.

The causes of the torment, which the cessation of the use of morphia brings about, are interesting. Agonizing pains show that the nerves, long muffled, have become more acutely sensitive than they were before the fatal drug was first employed. A host of lesser troubles—insomnia,

pain, and indigestion—used to attend the cure. Under better methods it is now possible to bring about disuse of morphia with far less of suffering. It should no longer be necessary to resort to sanatoriums—so-called—or to special hospitals for the relief of drug habits which any intelligent physician ought to be competent to care for. But to secure the freedom from a drug habit is not all. The physician who imagines that his case is well, because he has enabled an opium-taker to eat, sleep, and be comfortable without use of the sedative, can have seen little of the future of such people. The oversensitiveness to pain persists for months, and is a constant temptation. The moral and mental habits formed under opium—the irresolution, the recklessness, the want of shame, in a word, the general failure of all that is womanly—need something more than time to cure. But **I am** not preaching to the woman just set free from this bondage to sin, and speak of her only to emphasize the horror with which I wish to inspire the well, who yet may come some day to be the suffering.

If there be one set of women more liable than another to become victims of morphia or chloral,

it is the wives of physicians. Every winter I see four or five, and always it is true that the habit has arisen out of the effort of the husband to attend medically on his wife. Physicians make good husbands, and this is in part due to the fact that their knowledge of the difficulties of feminine life causes them to be more thoughtfully tender, and more charitable as concerns the effects upon women of certain inevitable conditions as to which the layman is ignorant or indifferent. But the very fulness of the husband's appreciation of a woman's drawbacks and little moral ailments, the outcome of her womanhood, becomes dangerous when he ventures to be her medical caretaker. What he coldly decides in another's case, he cannot in hers. How can he see her suffer and not give her of the abundance of relief in his hands? She is quick to know and to profit by this, and so the worst comes of it.

“It is easy for you to sit by in your strength and see me suffer,” said a woman once to me. She was on the verge of the morphia habit, and I was trying to break it off abruptly. I felt, as any gentle-hearted man must feel, the sting and hurt of her words. Next day she said to me,



“Of course you were right. I used to talk that way to B——, and he never could stand it.” He was her husband and a physician. She got well easily.

I do not believe that most women who sin in this way slip into it either quite so ignorantly and so unwarned as they would have you to suppose. Nearly always there is a time when some one—the physician, a friend, or their own reason—bids them pause, reflect, and choose.

“Alas! for thee, if thou from thine own soul dost turn and flee.  
Better the house and company of pain;  
Better distress;  
Better the stones of strife, the bread with tears;  
Humiliation and despair and fears;  
All, all the heart can suffer, the soul know,  
Rather than with the bestial train to go,  
With base rejoicings, ignorant of woe.”<sup>1</sup>

---

<sup>1</sup> “Sylvian, and Other Poems,” by Philip Varley (Langdon Mitchell).

## THE MORAL MANAGEMENT OF SICK OR INVALID CHILDREN.

---

NOT long ago a pretty little girl of ten was brought to me from a long distance to get my advice as to a slight paralysis of one leg. The trouble had existed for several years. I soon saw that the child was irritable, sensitive, and positive, and I was, therefore, careful to approach her gently. The moment it was proposed to show me the leg, she broke into a fury of rage, and no inducement I could offer enabled me to effect my purpose. An appeal to the parents, and from them to force, ended in a distressing battle. She bit, scratched, kicked, and at last won a victory, and was left sullen and sobbing on the floor. Next day the same scene was repeated. It is true that at length they were able to undress her, but neither threats nor persuasion would keep her quiet long enough to enable me to apply the simplest

tests. The case was obscure, and demanded the most careful study. Their time was limited, so that at length they were obliged to take her home in despair, without any guiding opinion from me, and with no advice, except as to her moral education, concerning which I was sufficiently explicit. I have seen many such illustrations of a common evil, and have watched the growth to adult life of some of these cases of wrecked character, and observed the unpleasant results which came as they grew older. I have used an extreme case as a text, because I desire to fix attention on the error which parents and some doctors are apt to commit in cases of chronic ailments in children.

As to the miserable sufferers who pass through long illness to death I have little to say. We naturally yield to their whims, pet and indulge them, moved by pitiful desire to give them all they want of the little which life affords them. In acute illness, with long convalescence, I am pretty sure that the tender mother does no real good by over-indulgence; but the subject is difficult, and hard to handle with justice and charity without calling down upon me the indignation of the unthought-

ful. It is so easy and pleasant to yield to the caprices of those we love, when they are in pain or helpless from illness,—so doubly hard at such times to say no. Yet, if in the case of a long convalescence, such as follows, perhaps, a typhoid or scarlet fever, we balance for the little one the too-easily yielded joy of to-day against the inevitable stringency of discipline, which, with recovered health, must teach the then doubly difficult lesson of self-restraint, we shall see, I think, that, on the whole, we do not add to the sum of happiness to which the child is entitled.

The mother at the sick-bed of her young child is, however, a being quite often as difficult to manage as her child. All her instinctive maternity is up in arms. Deep in the heart of many mothers there is an unconfessed and half-smothered sense of wrath at the attack which sickness has made on her dear one. Then nothing is too much to give; no sacrifice of herself or others too great to grant or demand. The irritability and feebleness of convalescence makes claims upon her love of self-sacrifice, and her prodigality of tenderness as positive and yet more baneful. That in most cases she may and

does go too far, and loses for her child what it is hard to recover in health, is a thing likely enough, yet to talk to her at such times of the wrong she does the child is almost to insult her. Nevertheless the unwisdom of a course of reckless yielding to all a child's whims is plain enough, for if the little one be long ill or weak, it learns with sad swiftness to exact more and more, and to yield less and less, so that it becomes increasingly hard to do for it the many little unpleasant things which sickness demands. Character comes strongly out in the maladies of the child, as it does even less distinctly in the sickness of the adult. The spoiled, over-indulged child is a doubly unmanageable invalid, and when in illness the foolish petting of the mother continues, the doctor, at least, is to be pitied.

The ductility of childhood has its dangerous side. This is seen very well in cases which, fortunately, are rather rare, and, for some reason, are less frequent in girls than in boys. These little ones observe sharply the faces and obvious motives of those about their sick-beds, and more readily than adults are led to humor the doubts they hear expressed by the doctor or their elders as to their capacity to do this

or that. Too frequent queries as to their feelings are perilously suggestive, and out of it all arises, in children of nervous or imaginative temperaments, an inexplicable tendency to fulfil the predictions they have heard, or actively to humor the ideas they acquire as to their own ailments and disabilities.

There is something profoundly human in this. With careless, unthoughtful people, who have trained a child to know that illness means absolute indulgence, and who pour out unguardedly their own fears and expectations at the bedside, the result for the child is in some cases past belief. The little one gets worse and worse. It accepts automatically the situation, with all the bribes to do so made larger by feebleness, and at last gains that extreme belief in its own inability to rise or move about which absolute convictions of this nature impose on child or man.

There is a further and worse stage possible. The child's claims increase. Its complaints gather force, and alarm those about it. Gratified in all its whims, it develops perverted tastes, or refuses all food but what it fancies. At last it becomes violent if opposed, and rules at will a scared

circle of over-affectionate relatives. When all else fails, it exaggerates or invents symptoms, and so goes on, until some resolute physician sees the truth and opens the eyes of an amazed family.

Certain physicians explain these cases as due to hysteria, and in a small number of instances there are signs which justify such an explanation. But in the larger proportion the mode of origin is complex, and depends on the coincidence of a variety of evils, none of which are of hysterical character. I am not here concerned so much with the exact nature of these troubles as I am with the avoidable errors in the management of sick childhood. If I can make the mother more thoughtfully alert, less disposed to terror and exaggeration, less liable to be led by her emotions, I shall have fulfilled my purpose without such discussion as is out of place in essays like these.

To make clear, however, the possibility of the disasters I have briefly described, an illustration may answer better than any length of generalized statements. A little fellow of nine once came under my care, and was said to have inflammation of the coverings of the brain.

There was a long story, which I may sum up in a few sentences. An only child; feeble in youth; indulgence to almost any degree; at the age of eight, a fall, not at all grave, but followed by some days of headache; long rest in bed, by order of a physician; much pity; many questions; half-whispered, anxious discussions at the bedside; yet more excessive indulgence, because every denial seemed to increase or cause headache. At last the slightest annoyance became cause for tears, and finally for blame, all of which a gentle, fearful mother bore as if it were part of the natural trials of disease. It took but a few months of complete non-restraint to make of a shrewd, bright, half-educated, spoiled boy a little brute, as to whose sanity there seemed to be some doubt. He was easily made well, and has lived to thank the sternness which won back the health of mind and body his parents had so foolishly helped to lose for him.

A single example may suffice, nor have I any fear that it may lead any one, least of all nature's gentlest creation, a mother, to be more severe than is reasonable. She it is who is really most responsible. She is ever beside the child



when the little actor is off guard. She may have the cleverness to see through the deceit or she may not. The physician comes and goes, and must take for granted much that he has no chance to see, and for which he has to trust the more constant attendant. Moreover, the rarity of these cases is apt to help to deceive him quite as much as does the mother's affectionate trust. Nevertheless, it is his fault if soon or late he fail to see the truth; but he may well be careful how he states his doubt. The mother at the sick-bed but too often resents as a wrong any hint at the true state of the case.

Children are singularly imitative, and more or less prone to suffer from this tendency. Hence the curious cases in which a child simulates, I do not say dissimulates, the malady it sees constantly before it, as when one child has attacks of false epilepsy, owing to having seen the real attack in a sister or brother, or when St. Vitus's dance runs through a school or an asylum.

To sum up, we credit these little ones with a simplicity of moral organization which forbids us to believe that the causes which are active for mischief in their elders are not as potent for

evil in them. The popular and reasonable creed of moral education, which teaches us to ask from a well child self-control, self-restraint, truth of statement, reasonable endurance of the unavoidable, good temper, is not too lightly or too entirely to be laid aside when sickness softens the rule of health and all our hearts go out in pity to the little sufferer.

Certain of the nervous and other maladies of children sometimes keep them a long while under treatments which are annoying, painful, or disabling. They often end by leaving them as strong as their fellows, but crippled, lame, disfigured, or with troubles that attract remark, or, at least, notice. Thus, a child may have hip-disease, and, after years of treatment, get well, and although vigorous enough to do all that is required in life, be more or less lame. In another case, there is disease of the bones of the spine. After a wearying treatment, it is well, but the little one has a distorted spine,—is humpbacked. Again, we have the common malady, palsy of childhood, and here, too, most probably, there is left a residue of disability, or, at all events, some loss of power.

In each case there are years of troublesome

treatment, all sorts of unpleasant limitations, pain it may be, and certainly, at the best, a variety of discomforts. The joy and little pleasures of youth are gone. It makes one sorrowful to think of such cases, even when all that competent means can do to help them is at their disposal, and still more to reflect on those who have to battle for health with no more resource than is left to the needy. What shall we not do for them! The woman's whole tendency is to give them all of herself and all else that she can control. Indulgence becomes inevitable, or seems to become so, and the mother is rare who does not insist that they shall have what they desire, and that her other children shall yield to them in all things. Her answer to herself and others is, "They have so little; let them at least have what they can." As rare as the reasonable mother is the sick child who can stand this treatment and survive with those traits of character which it above all others requires to make its crippled life happy, not to say useful. The child thus unrestrained and foolishly indulged must needs become ill-tempered. It loses self-control, and yet no one will need it more. It learns to expect no disappointments, and life is

to hold for it less than for others. Disease has crippled its body and the mother has crippled its character.

I have no belief that long illness is good for the mass of people, but the character of the adult sufferer is in his or her own hands to make, mar, or mend. In childhood the mother is in large measure responsible for the ductile being in her care. If she believes that unrestraint is her duty, she is laying up for the invalid a retribution which soon or late will bitterly visit on the child the sin or, if you like, the mistakes of the parent. It is her business and duty, no matter how hard may be to her the trial, to see that this child, above all others, shall be taught patience, gentleness, good temper, and self-control in all its varieties, nor should she fail to point out, as health returns and years go by, that it is not all of life to be straight and uncrippled. I need not dwell on this. Every wise woman will understand me, and be able to put in practice better than I can here state what I might more fully say.

I do not wish, however, to be understood as urging that all children long ill or crippled grow to be unamiable and spoiled. I do not quite know

why it is, but, after all, children are less apt to suffer morally from long illness than adults, and very often, despite careless or thoughtless usage, these young sufferers come out as wholesome in mind and heart as if they had known no trial, or, perhaps, because of it. It is in a measure a matter of original temperament. In other words, what the sick child was as to character modified results, and this is especially true as concerns the peculiarities which attract unpleasant notice. One person who has twitching of the muscles of the face is made miserable by the attention it invites; another is indifferent.

The cases of Lord Byron and Walter Scott are to the point. The former was sensitive and morbid about his deformity. I cannot help thinking that had his mother been other than she was, he would have been brought up to more wholesome views as to what was after all no very great calamity. Walter Scott suffered from a like trouble, but healthy moral surroundings and a cheerful nature saved him from the consequences which fell so heavily upon his brother poet.

Epilepsy is a malady but too common in childhood, and as to which a few words apart are

needed. Usually a child epileptic for some years will carry the disease with it for a time, the length of which no man can set. The disease may be such as to ruin mind and body, or the attacks may be rare, and not prevent courageous and resolute natures from leading useful lives. All intermediate degrees are possible. As a rule, no children need so inflexible a discipline as epileptics. Indulgence as regards them is only another name for ruin. Do as we may, they are apt to become morally perverted, and require the utmost firmness, and the most matured and educated intelligence, to train them wisely. Difficult epileptics and most idiots are best looked after, and certainly happiest, in some one of the competent training-schools for feeble-minded children.

Even the milder epileptic cases are hard to manage. I rarely see one which has been intelligently dealt with. Few mothers are able or willing to use a rule as stern, as enduring, as unyielding as they require.

As to education, I am satisfied that these children are the better for it, and yet almost invariably I find that in the cases referred to me some physician has, with too little thought,

recommended entire abandonment or avoidance of mental training. I have neither space nor desire to go into my reasons for a different belief. I am, however, sure that education limited as to time, education of mind, and especially of the hands, has for these cases distinct utility, while to them also, as to the other children crippled in mind or body, all that I have already urged applies with equal force.

As to the management of sick or crippled childhood, I have said far more than I had at first meant to say, and chiefly because I have been made to feel, as I thought the matter over, how far more difficult it is in practice than in theory. But this applies to all moral lessons, and the moralist must be credited by the thoughtful mother with a full perception of the embarrassments which lie in her path.

## NERVOUSNESS AND ITS INFLUENCE ON CHARACTER.

---

THERE are two questions often put to me which I desire to use as texts for the brief essay or advice of which nervousness<sup>1</sup> is

---

<sup>1</sup> Neither *nerves* nor *nervousness* are words to be found in the Bible or Shakespeare. The latter uses the word *nerve* at least seven times in the sense of *sinewy*. *Nervy*, which is obsolete, he employs as full of nerves, sinewy, strong. It is still heard in America, but I am sure would be classed as slang. Writers, of course, still employ *nerve* and *nervous* in the old sense, as a nervous style. Bailey's dictionary, 1734, has *nervous*,—*sinewy*, strongly made. Robt. Whytte, Edin., in the preface to his work on certain maladies, 1765, says, "Of late these have also got the name of nervous," and this is the earliest use of the word in the modern meaning I have found. Richardson has it in both its modern meanings, "vigorous," or "sensitive in nerves, and consequently weak, diseased." *Hysteria* is not in the Bible, and is found once in Shakespeare; as, "*Hysterica passio*, down," *Lear* ii. 4. It was common in Sydenham's day,—*i.e.*, Charles II. and Cromwell's time,—but he classified under *hysteria* many disorders no longer considered as of this nature.



the heading. As concerns this matter, I shall here deal with women alone, and with women as I see and know them. I have elsewhere written at some length as to nervousness in the male, for he, too, in a minor degree, and less frequently, may become the victim of this form of disability.

So much has been written on this subject by myself and others, that I should hesitate to treat it anew from a mere didactic point of view. But, perhaps, if I can bring home to the sufferer some more individualized advice, if I can speak here in a friendly and familiar way, I may be of more service than if I were to repeat, even in the fullest manner, all that is to be said or has been said of nervousness from a scientific point of view.

The two questions referred to above are these: The woman who consults you says, "I am nervous. I did not use to be. What can I do to overcome it?" Once well again, she asks you, —and the query is common enough from the thoughtful,—"What can I do to keep my girls from being nervous?"

Observe, now, that this woman has other distresses, in the way of aches and feebleness.

The prominent thing in her mind, nervousness, is but one of the symptomatic results of her condition. She feels that to be the greatest evil, and that it is which she puts forward. What does she mean by nervousness, and what does it do with her which makes it so unpleasant? Remark also that this is not one of the feebler sisters who accept this ill as a natural result, and who condone for themselves the moral and social consequences as things over which they have little or no reasonable control. The person who asks this fertile question has once been well, and resents as unnatural the weaknesses and incapacities which now she feels. She wants to be helped, and will help you to help her. You have an active ally, not a passive fool who, too, desires to be made well, but can give you no potent aid. There are many kinds of fool, from the mindless fool to the fiend-fool, but for the most entire capacity to make a household wretched there is no more complete human receipt than a silly woman who is to a high degree nervous and feeble, and who craves pity and likes power. But to go back to the more helpful case. If you are wise, you ask what she means by nervousness. You soon learn that

she suffers in one of two, or probably in both of two, ways. The parentage is always mental in a large sense, the results either mental or physical or both. She has become doubtful and fearful, where formerly she was ready-minded and courageous. Once decisive, she is now indecisive. When well, unemotional, she is now too readily disturbed by a sad tale or a startling newspaper-paragraph. A telegram alarms her; even an unopened letter makes her hesitate and conjure up dreams of disaster. Very likely she is irritable and recognizes the unreasonableness of her temper. Her daily tasks distress her sorely. She can no longer sit still and sew or read. Conversation no longer interests, or it even troubles her. Noises, especially sudden noises, startle her, and the cries and laughter of children have become distresses of which she is ashamed, and of which she complains or not, as her nature is weak or enduring. Perhaps, too, she is so restless as to want to be in constant motion, but that seems to tire her as it once did not. Her sense of moral proportion becomes impaired. Trifles grow large to her; the grasshopper is a burden. With all this, and in a measure out of all this, come certain bodily

disabilities. The telegram or any cause of emotion sets her to shaking. She cries for no cause; the least alarm makes her hand shake, and even her writing, if she should chance to become the subject of observation when at the desk, betrays her state of tremor. What caused all this trouble? What made her, as she says, good for nothing? I have, of course, put an extreme case. We may, as a rule, be pretty sure, as to this condition, that the woman has had some sudden shock, some severe domestic trial, some long strain, or that it is the outcome of acute illness or of one of the forms of chronic disturbance of nutrition which result in what we now call general neurasthenia or nervous weakness,—a condition which has a most varied parentage. With the ultimate medical causation of these disorderly states of body I do not mean to concern myself here, except to add also that the great physiological revolutions of a woman's life are often responsible for the physical failures which create nervousness.

If she is at the worst she becomes a ready victim of hysteria. The emotions so easily called into activity give rise to tears. Too weak for wholesome restraint, she yields. The little con-

vulsive act we call crying brings uncontrollable, or what seems to her to be uncontrollable, twitching of the face. The jaw and hands get rigid, and she has a hysterical convulsion, and is on the way to worse perils. The intelligent despotism of self-control is at an end, and every new attack upon its normal prerogatives leaves her less and less able to resist.

Let us return to the causes of this sad condition. It is a common mistake to suppose that the well and strong are not liable to onsets which cause nervousness. As a rule, they rarely suffer; but we are neatly ballasted, and some well people are nearer to the chance of being so overturned than it is pleasant to believe. Thus it is that what for lack of a better name we call "shock" is at times and in some people capable of inflicting very lasting evil in the way of nervousness.

We see this illustrated in war in the effects of even slight injuries on certain people. I have known a trivial wound to make a brave man suddenly timid and tremulous for months, or to disorder remote organs and functions in a fashion hard to understand. In the same way, a moral wound for which we are not prepared

may bring about abrupt and prolonged consequences, from which the most robust health does not always protect us, and which is in proportion disastrous if the person on whom it falls is by temperament excitable or nervous. I have over and over seen such shocks cause lasting nervousness. I knew a stout young clerk who was made tremulous, cowardly, sleepless, and, in the end, feeble, from having at a funeral fallen by mishap into an open grave. I have seen a strong woman made exquisitely nervous owing to the fall of a wall which did her no material damage. Earthquakes cause many such cases, and bad ones, as we have had of late sad occasion to know. The sudden news of calamity, as of a death or financial disaster, has in my experience made vigorous people nervous for months. A friend of mine once received a telegram which rather brutally announced the disgrace of one dear to him. He had a sense of explosion in his head, and for weeks was in a state of nervousness from which he but slowly recovered. There is something in cases like his to think about. The least preparation would have saved him, and we may be sure that there is wisdom in the popular idea that ill news should be

gently and guardedly broken to such as must hear it. To be forewarned is to be forearmed we say with true wisdom.

Prolonged strain of mind and body, or of both, is another cause apt to result in health failures and in nervousness as one attendant evil. The worst one I know is to nurse some person through a long disease. Women are apt to think that no one can so well care for their sick as they. Intrusion on this duty is resented as a wrong done to their sense of right. The friend who would help is thrust aside. The trained nurse excites jealous indignation. The volunteer gives herself soul and body to the hardest of tasks, and is rather proud of the folly of self-sacrifice. How often do we hear a woman say with pride, "I have not slept nor had my clothes off for a week." She does not see that her very affection unfits her for the calm control of the sick-room, and that her inevitable anxiety is incompatible with tranquil judgment. If you tell her that nursing is a profession, and that the amateur can never truly fill the place of the regular, she smiles proudly, and thinks that affection is capable of all things, and that what may be lost in skill will be made up in thoroughness

and compensated by watchfulness, such as she believes fondly only love can command. It is hard to convince such a woman.

It rarely chances that women are called upon to suffer in their common lives emotional strains through very long periods, and at the same time to sustain an excess of mental and physical labor. In days of financial trouble this combination is sometimes fatal to the health of the strongest men. When a loving relative undertakes to nurse one dear to her through a protracted illness, she subjects herself to just such conditions of peril as fall upon the man staggering under financial adversity.

The analogy to which I have referred is curiously complete. In both there is the combination of anxiety with physical and mental overwork, and in both alike the hurtfulness of the trial is masked by the excitement which furnishes for a while the means of waging unequal battle, and prevents the sufferer from knowing or feeling the extent of the too constant effort he or she is making. This is one of the evils of all work done under excessive moral stimulus, and when the excitation comes from the emotions the expenditure of nerve-



force becomes doubly dangerous, because in this case not only is the governing power taken away from the group of faculties which make up what we call common sense, but also because in women overtaxing the emotional centres is apt to result in the development of some form of breakdown, and in the secondary production of nervousness or hysteria.

If she cannot afford a nurse, or will not, let her at least share her duties with some one. Above all, let her know that every competent doctor watches even the best of his trained nurses, and insists that they shall be in the open air daily. Your good wife or mother thinks in her heart that when she has sickness at home she should not be seen out of doors, and that to eat, sleep, or care for herself is then wicked or something like that.

If you can make a woman change her dress, eat often, bathe as usual, and take the air, even if it must be so at night, she can stand a great deal, especially if you insist that she shall sleep her usual length of time. If she will not listen or obey, she runs a large risk, and is very apt to collapse as the patient recovers, and to furnish her family with a new case of illness, and the

doctor and herself with some variety of disorder of mind or body arising out of this terrible strain on both.

If physical tire, without chance for rest, with anxiety and incessant vigilance, is thus apt to cause wrecks in the nurse of ordinary illness, far more apt is it to involve breakdowns when a loving mother or sister endeavors to care for a protracted case of insanity. Unless the man of the house interferes, this effort is sure to bring disaster. And the more sensitive, imaginative, and loving is the self-appointed nurse, the more certain is she to suffer. There are no cases in which it is so hard to advise, none in which it is so difficult to get people to follow your advice. The morbid view of insanity, the vague sense of its being a stain, the horror of the hospital, all combine to perplex and trouble us. Yet here, if at any time, it is wise to cast the whole weight on the physician and to abide by his decision.

Families see this peril, and can be often made to understand the unwisdom of this sacrifice; but, in cases of prolonged disease, such as hysteria in a bedridden sister or mother, it is hard to make them hear reason, and still more hard to make the nursing relation understand that

she is of necessity the worst of nurses, and may share the wreck she helps to make.

These old and happily rare cases of chronic nervous invalids are simply fatal to loving nurses. I have said, perhaps too often, that invalidism is for most of us a moral poison. Given a nervous, hysterical, feeble woman, shut out from the world, and if she does not in time become irritable, exacting, hungry for sympathy and petty power, she is one of nature's noblest. A mother or sister gives herself up to caring for her. She is in the grip of an octopus. Every fine quality of her nature helps to hurt her, and at last she breaks down utterly and can do no more. She, too, is become nervous, unhappy, and feeble. Then every one wonders that nobody had the sense to see what was going on. I can count many examples of nervousness which have arisen in this fashion. Perhaps my warning may not be without good results. Over and over I have made like statements in one or another form, and the increasing experience of added years only contributes force to my belief that, in still urging the matter, I am doing a serious duty. I ought to say also that the care of these invalids is, even to the well-trained and

thoughtful nurse, one of the most severe of moral and physical trials, and that, in the effort to satisfy the cravings of these sick people, I have seen the best nurses crumble as it were in health, and at last give up, worn out and disheartened. A part of the responsibility of such disasters falls on the physician who forgets that it should be a portion of his duty to look sharply after the health of too devoted nurses as well as that of selfish patients.

I have now said all that I need to say of the causes which, directly or indirectly, evoke the condition we call nervousness. Many of these are insidious in their growth. Too often the husband, if she be married, is immersed in his own cares, and fails to see what is going on. "I am not ill enough to see a doctor," she says, and waits until she has needlessly increased the difficulties of his task. Let us suppose, however, that, soon or late, she is doing, in a merely medical way, all that he insists upon, what more can she do for herself? She has before her very likely a long trial, severe in its exactions in proportion to her previous activity of mind and body. She most probably needs rest, and now that physicians have learned its value, and that

not all ills are curable by exertion, she is told to lie down some hours each day. If she cannot get rid of her home duties, let her try at least to secure to herself despotically her times of real and true rest. To lie down is not enough. What she needs is undisturbed repose, and not to have to expect every few minutes to hear at her door the knocks and voices of servants or children. It is difficult to secure these most needful times of silent security even in health, as most women too well know. Very often the after-meal hours are the most available and the more desirable as times of repose, because in the weak digestion goes on better when they are at rest. She will find, too, that some light food between meals and at bedtime is useful, but this is within the doctor's province, and I am either desirous to avoid that or to merely help him. Air, too, she wants rather than any such great exertion as wearies; and, as regards this latter, let her understand that letter-writing, of which many women are fond, must be altogether set aside.

It is, however, the moral aspects of life which will trouble her most. The cares which once were easily shaken off stick to her like burrs,

and she carries them to bed with her. I have heard women say that men little know the moral value to women of sewing. It becomes difficult when people are nervous, but this or some other light handiwork is then invaluable.

By this time she has learned that her minor, every-day duties trouble her, and when about to meet them, if wise, she will put herself, as we all can do, in an attitude of calmness. This applies still more forcibly to the larger decisions she must so often have to make as to children, house, and servants. Worry, as I have elsewhere said, is as sand in the mental and moral machinery, and easily becomes a mischievous habit. We can stand an immense deal of work, and can, even if weak, bear much, if only we learn to dismiss small questions without worry or unreasonable reconsiderations. As concerns temper, we constantly prepare ourselves to meet even just causes of anger, and thus by degrees learn more and more easily, and with less and less preparation, to encounter tranquilly even the most serious vexations. In health, when not nervous, a woman well knows that there are seasons when she must predetermine not to be nervous; and when ill-health has made her emo-

tional, she must learn to be still, more constantly on guard. Above all, it is the small beginnings of nervousness which she has to fear.

Tears are, for the nervous woman, the seed of trouble. Let her resolutely shun this commencement of disaster. The presence of others is apt to insure failure of self-control. A word of pity, the touch of affection, the face of sympathy, double her danger. When at her worst, let her seek to be alone and in silence and solitude to fight her battle. Fresh air, a bath (if she can bear that), even the act of undressing, will often help her. I once quoted a valued friend as saying that "we never take out of a cold bath the thoughts we take into it," and the phrase is useful and true.

Above all, let such a woman avoid all forms of emotion. Her former standards of resistance apply no longer, and what once did not disturb will now shake her to the centre. A time comes, however, when she will do well to meet and relearn to bear calmly all the little emotional trials of life. I know a nervous woman—and no coward, either—who for months, and wisely, read no newspapers, and who asked another to open and read all her letters and telegrams.

The day came when she was able to resume the habits of health, but for a long time the telegram at least was a sore distress, and she could only meet it by a resolute putting of herself in the attitude of tranquillity of which I have spoken. To say more should be needless. For the nervous strong emotions are bad or risky, and from violent mirth to anger all are to be sedulously set aside. Calm of mind and quiet of body are what she most needs to aid the more potent measures of the physician.

The woman in the situation I have described has probably a variety of symptoms on which her condition causes her to dwell. A great many of them are of little practical moment. If she is irresolute and weak, she yields where she should not, and finds for inactivity or for fears ample excuses in the state of her own feelings. An unwholesome crop of disabilities grows out of these conditions. It then becomes the business of her physician to tell her what is real, what is unreal, what must be respected, what must be overcome or fought. She has acquired within herself a host of enemies. Some are strong, some are feeble. The hour for absolute trust has arrived, and she must now be-



lieve in her adviser, or, if she cannot, she must acquire one in whom her belief will be entire and unquestioning.

Let us take an illustration. Such a woman is apt enough to suffer from vertigo or giddiness. "If I walk out," she says, "I become giddy. I am rarely free from this unless I am in bed, and it terrifies me." You know in this case that she is still strong enough to exercise in moderation. You say, "Walk so much daily. When you fall we will think about stopping. Talk to some one when you go out; have a friend with you, but walk." She must believe you to succeed. This is a form of faith-cure which has other illustrations. You tell her that she must disregard her own feelings. She credits you with knowing, and so wins her fight.

There is a sense of fatigue which at some time she should learn to treat with disrespect, especially when disuse of her powers has made their exercise difficult, and yet when returning health makes it wise to employ them. To think, and at last to feel sure that she cannot walk is fatal. And above all, and at all times, close attention to her own motions is a great evil. We cannot swallow a pill because we think of

what, as regards the larger morsels of food, we do automatically. Moreover, attention intensifies fatigue. Walk a mile, carefully willing each leg-motion, and you will be tired. The same evil results of attention are observed in disease as regards other functions over which we seem in health to be without direct power of control.

“Mind-cure,” so called, has, in some shape, its legitimate sphere in the hands of men who know their profession. It is not rare to find among nervous women a few in whom you can cause a variety of odd symptoms by pressing on a tender spine and suggesting to the woman that now she is going to feel certain pains in breast, head, or limbs. Nervous women have, more or less, a like capacity to create or intensify pains and aches, but when a woman is assured that she only seems to have such ailments she is apt, if she be one kind of woman, to be vexed. These dreamed pains—I hardly know what else to call them—are, to her, real enough. If she be another kind of woman, if she believes you, she sets herself to disregard these aches and to escape their results by ceasing to attend to them. You may call this mind-cure or what you will,

but it succeeds. Now and then you meet with cases in which, from sudden shock or accident, a woman is led to manufacture a whole train of disabling symptoms, and if in these instances you can convince her that she is well and can walk, eat, etc., like others, you make one of those singular cures which at times fall to the luck of mind- or faith-cures when the patient has not had the happy fortune to meet with a physician who is intelligent, sagacious as to character, and has the courage of his opinions. I could relate many such cases if this were the place to do so, but all I desire here is to win the well woman and the nervously-sick woman to the side of the physician. If she flies from him to seek aid from the ignorant fanatic, she may, in rare cases, get what her trained adviser ought to give her and she be willing to use, while in unskilful hands she runs sad risks of having her too morbid attention riveted to her many symptoms; for to think too much about their disorders is, on the whole, one of the worst things which can happen to man or woman, and wholesome self-attention is difficult, nay, impossible, to command without help from a personally-uninterested mind outside of oneself.

I cannot leave this subject without a further word of solemn warning. In my youth we had mesmerism with its cures, then we had and have spiritualism with its like pretensions. From time to time we have had faith-cures. They come and they go, and have no stable life. The evil they do lives after them in the many mental wrecks they leave. When the charlatan Newton was ordering every class of the sick to get well, I was called upon to see case after case of the most calamitous results on mind and body. Now and then he had the luck to meet some one who was merely idea-sick,—a class of cases we know well. Then he made a cure which would have been as easy to me as to him. I made much inquiry, but could never find a case of organic disease with distinct tissue-changes which he had cured. A man with hopeless rheumatic alterations of joints was made to walk a few steps without crutches. This he did at sore cost of pain, and then came to me to tell me his tale with a new set of crutches, the healer having kept the old set as evidence of the cure. And now we have the mind-cure, Christian science and the like,—a muddle of mystical statements, backed by a

medley of the many half-examined facts, which show the influence of mental and moral states over certain forms of disorder. The rarity of these makes them to be suspected. Hardly any have the solid base of a thorough medical study, and we lose sight of them at the moment of cure and learn nothing as to their future.

The books on mind-cure are calculated to make much and serious evil. I have read them with care, and have always risen from them with the sense of confusion which one would have if desired to study a pattern from the back of a piece of embroidery. There is, however, a class of minds which delight in the fogs of mystery, and, when a book puzzles them, accept this as evidence of depth of thought. I have been bewildered at times by the positiveness and reasoning folly of the insane, and I think most trained intelligences will feel that books like these mystical volumes require an amount of care and thinking to avoid bewilderment of which the mass of men and women are not possessed. In a few years they will be the rarely read and dusty volumes, hid away in libraries, and consulted only by those who undertake the sad task of writing the history of credulity.

Their creed will die with them, and what is best of it and true will continue to be used by the thoughtful physician, as it has been in all ages. But, meanwhile, it is doing much harm and little good. Every neurologist sees already some of its consequences, and I, myself, have over and over had to undo some of the evil it had done.

Our nervous woman is well. Slowly, very slowly, she has won flesh and color, which means gain in quality and quantity of blood. By degrees, too, she has been able to return to the habits and endurances of health. And now she asks that other question, "I have daughters who are yet young, but how shall I guard them against nervousness?" and again puts forward this single complex symptom in disregard of the states of body which usually accompany it, and are to us matters quite as grave. She knows well that the mass of women are by physiological nature more liable to be nervous than are men. It is a sad drawback in the face of the duties of life, that a very little emotional disturbance will suffice to overcome the woman as it does not do the man, and that the same disease which makes him irritable makes her nervous.

Says Romanes, in an admirable and impartial article on the mental differences of men and women, "She is pre-eminent for affection, sympathy, devotion, self-denial, modesty, long-suffering or patience under pain, disappointment, and adversity, for reverence, veneration, religious feeling, and general morality." I accept his statement to add that these very virtues do many of them lead to the automatic development of emotion, which, in its excesses and its uncontrolled states, is the parent of much of the nervousness not due to the enfeeblement of disease.<sup>1</sup>

With the intellectual differences between man and woman I have here little to do. That there is difference, both quantitative and in a measure qualitative, I believe, nor do I think any educational change in generations of women will ever set her, as to certain mental and moral qualifications, as an equal beside the man. It would be as impossible as to make him morally and physically, by any educational or other training, what the woman now is, his true superior in much that is as high, and as valuable as any mental capacities he may possess; nor does my creed

---

<sup>1</sup> *Journal of Popular Science*, July, 1887.

involve for woman any refusal of the loftiest educational attainments. I would only insist on selection and certain limitations as to age of training and methods of work, concerning which I shall by and by have something more to say. Neither would I forbid to her any profession or mode of livelihood. This is a human right. I do not mean to discuss it here either as citizen or physician; but, as man, I like to state for my fellow-man that there are careers now sought and won and followed by her which for him inevitably lessen her true attractiveness, and to my mind make her less fit to be the "friendly lover and the loving friend."<sup>1</sup> *Æsthetic* and other sacrifices in this direction are, however, her business, not mine, and do not influence my practical judgments as to what freedom to act is or should be hers in common with men. For most men, when she seizes the apple, she drops

---

<sup>1</sup> One would like to know how many women truly want the suffrage, and how, when it was won, the earnest anti-tariff wife would construe the marriage service in the face of the husband's belief in high tariff. The indirect influence of women in politics is worth a thought. We felt it sorely in 1861, and thence on to the war's end, and to-day it is the woman who is making the general prohibition laws probable. For ill or good she is still a power in the state.



the rose. I am a little afraid that Mrs. Lynn Linton is right as to this, but it took some courage to say what she said,<sup>1</sup> and she looks at the matter from a more practical point of view, and deserves to be read at length rather than quoted in fragments.

I return to the subject. We want our young girl to be all that Romanes says she is. We desire, too, that she shall be as thoroughly educated in relation to her needs as her brothers, and that in so training her we shall not forget that my ideal young person is to marry or not, and, at all events, is to have a good deal of her life in her home with others, and should have some resources for minor or self-culture and occupation besides the larger ones which come of more distinctively intellectual acquirements.

I turn now to the mother who asks this question, and say, "What of your boys? Why are you not concerned as to them?" "Oh, boys are never nervous. One couldn't stand that; but they never are. Girls are so different." My answer is a long one. I wish I could think that it might be so fresh and so attractive as to secure

---

<sup>1</sup> *Fortnightly*, 1886.

a hearing; but the preacher goes on, Sunday after Sunday, saying over and over the same old truths, and, like him, with some urgency within me to speak, I can only hope that I may be able so to restate certain ancient verities as to win for them a novel respect and a generous acceptance.

The strong animal is, as a rule, the least liable to damaging emotion and its consequences. Train your girls physically, and, up to the age of adolescence, as you train your boys. Too many mothers make haste to recognize the sexual difference. To run, to climb, to swim, to ride, to play violent games, ought to be as natural to the girl as to the boy. All this is fast changing for us, and for the better. When I see young girls sweating from a good row or the tennis-field, I know that it is preventive medicine. I wish I saw how to widen these useful habits so as to give like chances to the poor, and I trust the time will come when the mechanic and the laborer shall insist on public play-grounds as the right of his little ones.<sup>1</sup>

---

<sup>1</sup> The demagogue urges his rights to much that he cannot have in any conceivable form of society. Let him ask for free

The tender mother, who hates dirt and loves neatness, and does not like to hear her girls called tom-boys, may and does find it hard to cultivate this free out-door life for her girls even when easy means make the matter less difficult than it is for the caged dweller in cities during a large portion or the whole of a year.

I may leave her to see that delicacy and modesty find place enough in her educational trainings, but let her also make sure that her girls have whatever chance she can afford to live out of doors, and to use the sports which develop the muscles and give tone and vigor. Even in our winters and in-doors, she can try to encourage active games such as shuttlecock and graces. I know of homes where the girls put on the gloves, and stand up with their brothers, and take gallantly the harmless blows which are so valuable a training in endurance and self-control.

I am reminded as I write that what I say

---

libraries, free baths, free music, and, above all, free and ample play-grounds within easy reach. I wonder that the rich who endow colleges do not ever think of creating play-grounds. I wish I could open some large pockets by an appeal to hearts at large.

applies and must apply chiefly to the leisure class; but in others there is a good deal of manual work done of necessity, and, after all, the leisure class is one which is rapidly increasing in America, and which needs, especially among its new recruits, the very kind of advice I am now giving. Severer games, such as cricket, which I see girls playing with their brothers, tennis, fencing, and even boxing, have for both sexes moral values. They teach, or some of them teach, endurance, contempt of little hurts, obedience to laws, control of temper, in a word, much that under ordinary circumstances growing girls do not get out of their gentler games. These are worth some risks, and such as they are need not trouble seriously the most careful mother. Neither need she fear for girls up to the age of puberty that they are any more liable to serious damage than are her boys.

When for her young daughters this time of change comes near, she may rest assured that their thorough physical training will have good results. Beyond this point it is hard to generalize, and, of course, the more violent games, in which girl and boy are or may be as one, must cease. But each case must stand alone, and so

be judged. There are plenty of healthy girls who may continue to row, to ride, to swim, to walk as before, but there are individual cases as to which advice is needed, although, as to all girls, it should be the rule that at certain times temperate exercise, lessened walks, and no dancing, riding, rowing, skating, or swimming should be allowed. Girls feel these restrictions less if they are so stringently taught from the outset as to become habits, and this is all I care to say.

Once past the critical years, and there is no reason why the mass of women should not live their own lives as men live theirs, except that always, in my opinion, the prudent woman will at certain times save herself. It is still true that even healthy women exercise too little. Our climate makes walking unpleasant, and to get in a good sweat in summer, or to wade through slush in winter, is hateful to the female soul. The English reproach us with this defect, and rightly, but do not estimate the difficulties of climate. Australian women walk little, and the English dame who comes to this country to live soon succumbs to the despotism of climate and abandons her habits of ample exercise afoot.

The in-door resources of women for chest and arm exertion are sadly few, and I think it fortunate when they are so situated as to have to do things in the household which exact vigorous use of the upper extremities. Nothing is a better ally against nervousness or irritability in any one than either out-door exercise or pretty violent use of the muscles. I knew a nervously-inclined woman who told me that when she was losing self-control she was accustomed to seek her own room, and see how long she could keep up a shuttlecock without a failure. As to weather, again, I should say the worse the weather the better the exercise of a brisk walk; and my wise mother shall see that her girls do not dawdle about in-doors, but get a good tramp under all skies as a part of the habits of life. A sturdy struggle with a rough day blows the irritability and nervousness of the hour out of any but the truly sick, and I know as to some folks that the more they are out of doors the better they are morally as well as physically.

My ideal mother has looked on and seen her daughters grow up to be strong and vigorous. When the time came, she has not forgotten that she has had and has to deal with one of her own

sex. During the years of their childhood she should understand, as concerns her girls, that to differentiate too largely their moral lessons from those of their brothers is unwise. Something as to this I have said in a former chapter as concerns the training of invalid children. It applies also to the well. The boy is taught self-control, repression of emotion, not to cry when hurt. Teach your girls these things, and you will in the end assure to them that habitual capacity to suffer moral and physical ill without exterior show of emotion, which is so true an aid to the deeper interior control which subdues emotion at its sources, or robs it of its power to harm. Physical strength and an out-door life will make this lesson easy and natural. Be certain that weakness of body fosters and excuses emotional non-restraint, and that under long illness the most hardy man may become as nervously foolish as a spoiled child. Crave, then, for your girls strength and bodily power of endurance, and with this insist that the boy's code of emotional control shall be also theirs. But to do all this you must begin with them young, and not have to make each year undo the failure of the last. A dog-trainer once told me that it was a good

thing to whip the smallest pups with a straw, and to teach them good habits, or try to do so, from birth. He put it strongly; but be sure that if we wish to build habits thoroughly into the mental and physical structure of childhood, we shall do well to begin early. As regards the out-door life, I shall have something more to say in another place, for much is within the reach of the thoughtful, which, with reasonable means, they can get for girls and women, and which yet they do not get; and there are many ways in which also we can so train our girls as to create for them constant and lasting bribes to be in the air.

The question of education is a more difficult one to handle. In childhood I do not see that our wise mother need be anxious; but there comes a day when her girl is entering womanhood, when she will have to think of it. I have dealt with this question so fully of late that I have little here to add.<sup>1</sup> Our public schools are so organized that there is small place or excuse for indulgence, although, under wise management, this has been shown to be possible.<sup>2</sup> But

---

<sup>1</sup> "Wear and Tear," 6th ed., 1887.

<sup>2</sup> *Ibid.*, p. 54.



there is a vast and growing class which is so situated that the mother can more largely control the studies and hours of her girls than can the parents of those who frequent our municipal schools.

A great change is on her child. Let her watch its evolution, and not with such apparent watchfulness as shall suggest the perils she is to look out for. We are all organized with a certain capital of nerve-force, and we cannot spend it with equal recklessness in all directions. If the girl bears well her gathering work,—that is, as one could wish,—we may let her alone, except that the wise mother will insist on lighter tasks and some rest of body at the time when nature is making her largest claim upon the vital powers. The least sign of physical failure should ring a graver alarm, and make the mother insist, at every cost, upon absence of lessons and reasonable repose. The matter is simple, and I have no more to say.

I am dealing now so entirely with the moral and physical aspects of a woman's life, and so distinctly from the medical point of view, that I do not feel called upon to discuss, in all its aspects, the mooted question of the values and the

perils of the higher education. At one time it was not open to women at all. Now it is within her reach. Our girl is well, and has passed, happily, over her time of development. Will the larger education which she so often craves subject her to risks such as are not present to the man,—risks of broken health and of its consequences? I wish to speak with care to the mother called upon to decide this grave question. I most honestly believe that the woman is the better in mind and morals for the larger training, better if she marries, and far better and happier if it chances that she does not. If we take the mass of girls, even of mature age, and give them the training commonly given to men, they run, I think, grave risks of being injured by it, and in larger proportion than do their brothers. Where it seems for other reasons desirable, it should be, I think, a question of individual selection. The majority of healthy young women ought to be able to bear the strain. Once in a female college, the woman goes on, and it is my own experience that, on the whole, she exhibits a far larger list of disastrous results from such work than do young men. If she be in the least degree nervous or not well, I, for

one, should resolutely say no to all such claims; for let us bear in mind that the higher education is rarely to be used as men use it, to some definite end, and is therefore not, on the whole, so essential to her as to him. Few women mean it as a way towards medicine, or even the upper ranks of teaching; and if they do, the least doubt as to health ought to make us especially unwilling to start an unseaworthy or uninsurable vessel upon an ocean of perilous possibilities. I wish that every woman could attain to the best that men have. I wish for her whatever in the loftiest training helps to make her as mother more capable, as wife more helpful; but I would on no account let the healthiest woman thus task her brain until she is at least nineteen. If she is to marry, and this puts it off until twenty-three, I consider that a gain not counted by the advocates of the higher education. I leave to others to survey the broad question of whether or not it will be well for the community that the mass of women should have a collegiate training. It is a wide and wrathful question, and has of late been very well discussed in Romanes's paper, and by Mrs. Lynn Linton. I think the conclusions of the former, on the

whole, are just; but now, whatever be my views as to the larger interests of the commonwealth and the future mothers of our race, I must not forget that I am giving, or trying to give, what I may call individualized advice, from the physician's view, as to what is wisest.

Let us suppose that circumstances make it seem proper to consider an ambitious young woman's wish, and to let her go to a college for women. We presume that she has average health. But let no prudent mother suppose that in these collections of persons of one sex her child will be watched as she has been at home. At no time will she more need the vigilant insight of a mother, and yet this can only be had through letters and in the holiday seasons. Nor can the mother always rely upon the girl to put forward what may cause doubt as to her power to go on with her work. I utterly distrust the statistics of these schools and their graduates as to health, and my want of reliance arises out of the fact that this whole question is in a condition which makes the teachers, scholars, and graduates of such colleges antagonistic to masculine disbelievers in a way and to a degree fatal to truth. I trust far more what I

hear from the women who have broken down under the effort to do more than they were fit to do, for always, say what you may, it is the man's standard of endurance which is set before them, and up to which they try to live with all the energy which a woman's higher sense of duty imposes upon the ambitious ones of her sex. I have often asked myself what should be done to make sure that these schools shall produce the minimum amount of evil; what can be done to avoid the penalties inflicted by over-study and class competitions, and by the emotional stimulus which women carry into all forms of work. Even if the doctor says this girl is sound and strong, her early months of college labor should be carefully watched. Above all, her eyes should be seen to, because in my experience some unsuspected disorder of vision has been fruitful of headaches and overstrain of brain, nor is it enough to know that at the beginning her eyes are good. Extreme use often evolves practical evils from visual difficulties at first so slight as to need or seem to need no correction.

The period of examinations is, too, of all others, the time of danger, and I know of many

sad breakdowns due to the exaction and emotional anxieties of these days of competition and excitement.

Let me once for all admit that many girls improve in health at these colleges, and that in some of them the machinery of organization for care of the mental and physical health of their students seems to be all that is desirable. That it does not work satisfactorily I am sure, from the many cases I have seen of women who have told me their histories of defeat and broken health. The reason is clear. The general feeling (shall I say prejudices?) of such groups of women is bitterly opposed to conceding the belief held by physicians, that there are in the woman's physiological life disqualifications for such continuous labor of mind as is easy and natural to man. The public sentiment of these great schools is against any such creed, and every girl feels called upon to sustain the general view, so that this acts as a constant goad for such as are at times unfit to use their fullest possibility of energy. Modest girls, caught in the stern mechanism of a system, hesitate to admit reasons for lessened work or to exhibit signals of failure, and this I know to be the

case. The practical outcome of it all is that the eyes of home can never be too thoughtfully busy with those of their girls who have won consent to pursue, away from maternal care, the higher education of female colleges. I must have wearied that wise mother by this time, but, perhaps, I have given her more than enough to make her dread these trials.

I should say something as to the home-life of girls who go through the ordinary curriculum of city day schools were it not that I have of late so very fully reconsidered and rewritten my views as to this interesting question. I beg to refer my unsatisfied reader to a little book which, I am glad to know, has been helpful to many people in the last few years.<sup>1</sup>

---

<sup>1</sup> "Wear and Tear," pp. 30 to 60. J. B. Lippincott Company, Philadelphia, 1887.

## OUT-DOOR AND CAMP-LIFE FOR WOMEN.

---

A GOOD many years ago I wrote a short paper, meant to capture popular attention, under the title of "Camp Cure." I have reason to think that it was of use, but I have been led to regret that I did not see when it was written that what I therein urged as desirable for men was not also in a measure attainable by many women. I wish now to correct my error of omission, and to show not only that in our climate camp-life in some shape can be readily had, but also what are its joys and what its peculiar advantages.<sup>1</sup> My inclination to write anew on this subject is made stronger by two illustrations which recur to my mind, and which show how valuable may be an entire

---

<sup>1</sup> "Nurse and Patient," and "Camp Cure," by S. Weir Mitchell. J. B. Lippincott Company Philadelphia.



out-door life, and how free from risks even for the invalid. The lessons of the great war were not lost upon some of us, who remember the ease with which recoveries were made in tents, but single cases convince more than any statement of these large and generalized remembrances.

I knew a sick and very nervous woman who had failed in many hands to regain health of mind. I had been able to restore to her all she needed in the way of blood and tissue, but she remained, as before, almost helplessly nervous. Wealth made all resources easy, and yet I had been unable to help her. At last I said to her, "If you were a man I think I could cure you." I then told her how in that case I would ask a man to live. "I will do anything you desire," she said, and this was what she did. With an intelligent companion, she secured two well-known, trusty guides, and pitched her camp by the lonely waters of a Western lake in May, as soon as the weather allowed of the venture. With two good wall-tents for sleeping- and sitting-rooms, with a log hut for her men a hundred yards away and connected by a wire telephone, she began to make her experiment.

A little stove warmed her sitting-room at need, and once a fortnight a man went to the nearest town and brought her books. Letters she avoided, and her family agreed to notify her at once of any real occasion for her presence. Even newspapers were shut out, and thus she began her new life. Her men shot birds and deer, and the lake gave her black bass, and with these and well-chosen canned vegetables and other stores she did well enough as to food. The changing seasons brought her strange varieties of flowers, and she and her friend took industriously to botany, and puzzled out their problems unaided save by books. Very soon rowing, fishing, and, at last, shooting were added to her resources. Before August came she could walk for miles with a light gun, and could stand for hours in wait for a deer. Then she learned to swim, and found also refined pleasure in what I call word-sketching, as to which I shall by and by speak. Photography was a further gain, taken up at my suggestion. In a word, she led a man's life until the snow fell in the fall and she came back to report, a thoroughly well woman.

A more notable case was that of a New Eng-

land lady, who was sentenced to die of consumption by at least two competent physicians. Her husband, himself a doctor, made for her exactly the same effort at relief which was made in the case I have detailed, except that when snow fell he had built a warm log cabin, and actually spent the winter in the woods, teaching her to live out in the air and to walk on snowshoes. She has survived at least one of her doctors, and is, I believe, to this day a wholesome and vigorous wife and mother.

What large wealth did to help in these two cases may be managed with much smaller means. All through the White Mountains, in summer, you may see people, a whole family often, with a wagon, going from place to place, pitching their tents, eating at farm-houses or hotels, or managing to cook at less cost the food they buy. Our sea-coast presents like chances. With a good tent or two, which costs little, you may go to unoccupied beaches, or by inlet or creek, and live for little. I very often counsel young people to hire a safe open or decked boat, and, with a good tent, to live in the sounds along the Jersey coast, going hither and thither, and camping where it is pleasant, for,

with our easy freedom as to land, none object. When once a woman—and I speak now of the healthy—has faced and overcome her dread of sun and mosquitoes, the life becomes delightful. The Adirondacks, the Alleghanies, and the Virginia mountains afford like chances, for which, as these are in a measure remote, there must be a somewhat more costly organization. I knew well a physician who every summer deserted his house and pitched tents on an island not over three miles from home, and there spent the summer with his family, so that there are many ways of doing the same thing.

As to the question of expense, there is no need to say much. All over our sparsely-inhabited land places wild enough are within easy reach, and the journey to reach them need not be long. Beyond this, tent-life is, of course, less costly than the hotel or boarding-house, in which such numbers of people swelter through their summers. As to food, it is often needful to be within reach of farm-houses or hotels, and all kind of modifications of the life I advise are possible.

As to inconveniences, they are, of course, many, but, with a little ingenuity, it is easy to

make tent-life comfortable, and none need dread them. Any book on camp-life will tell how to meet or avoid them, and to such treatises I beg to refer the reader who wishes to experiment on this delightful mode of gypsyng.

The class of persons who find it easy to reach the most charming sites and to secure the help of competent guides is, as I have said in another place, increasing rapidly. The desire also for such a life is also healthfully growing, so that this peculiarly American mode of getting an outing is becoming more and more familiar. It leads to our young folks indulging in all sorts of strengthening pursuits. It takes them away from less profitable places, and the good it does need not be confined to the boys. Young women may swim, fish, and row like their brothers, but the life has gains and possibilities, as to which I would like to say something more. In a well-ordered camp you may be sure of good food and fair cooking. To sleep and live in the air is an insurance against what we call taking cold. Where nature makes the atmospheric changes, they are always more gradual and kindly than those we make at any season when we go from street to house or house to street.

My brothers during the war always got colds when at home on leave, and those who sleep in a chinky cabin or tent soon find that they do not suffer and that they have an increasing desire for air and openness.

To live out of doors seems to be a little matter in the way of change, and that it should have remarkable moral and intellectual values does not appear credible to such as have not had this experience.

Yet, in fact, nothing so dismisses the host of little nervousnesses with which house-caged women suffer as this free life. Cares, frets, worries, and social annoyances disappear, and in the woods and by the waters we lose, as if they were charmed away, our dislikes or jealousies, all the base, little results of the struggle for bread or place. At home, in cities, they seem so large; here, in the gentle company of constant sky and lake and stream, they seem trivial, and we cast them away as easily as we throw aside some piece of worn-out and useless raiment.

The man who lives out of doors awhile acquires better sense of moral proportions, and thinks patiently and not under stress, making tranquil companions of his worthy thoughts.

This is a great thing, not to be hurried. There seems to me always more time out of doors than in houses, and if you have intellectual problems to settle, the cool quiet of the woods or the lounging comfort of the canoe, or to be out under "the huge and thoughtful night," has many times seemed to me helpful. One gets near realities out of doors. Thought is more sober; one becomes a better friend to one's self.

As to the effect of out-door life on the imaginative side of us, much may be said. Certainly some books get fresh flavors out of doors, and you see men or women greedily turn to reading and talking over verse who never dream of it when at home. I am tempted to mention the poets, and even the other authors who gain a kindly rubric for their work from the gentle company of lake and wood and stream. I should frankly name Walt Whitman and Thoreau, and pause pretty soon in wonder at the small number of poets who suggest out-door life as their source of inspiration. A good many of them—read as you lie in a birch canoe or seated on a stump in the woods—shrink to well-bred, comfortable parlor bards, who seem to you to have gotten their nature-lessons through plate-

glass windows. The test is a sharp one, and will leave out some great names and let in some hardly known, or almost forgotten. Books to be read out of doors would make a curious catalogue, and would vary, as such lists must, with every thoughtful reader, while some would smile, perhaps with reason, at the idea of any such classification. Certainly all would name Wordsworth, and a few would add Clough, whilst the out-door plays of Shakespeare would come in, and we should soon be called on to feel that for this sort of congenial open-air poetic company we have still to fall back on the vast resources of English verse. Somehow, as yet, our own poets have not gotten fully into imaginative relation with what is peculiar in our own flowers, trees, and skies. This does not lessen our joy in the masters of English verse, because, of course, much of what they have sung has liberal application in all lands; yet is there something which we lose in them for lack of familiar knowledge of English lanes and woods, of English flowers and trees. A book of the essentially American nature—poems found here and there in many volumes—would be pleasant, for surely we have had no one poet as to whom



it is felt that he is absolutely desirable as the interpretive poetic observer who has positive claims to go with us as a friendly bookmate in our wood or water wanderings. I have shrunk, as will have been seen, from the dangerous venture of enlarging my brief catalogue. What I have just now spoken of as one's bookmates will appear in very different lights according to the surroundings in which we seek to enjoy their society. If, as to this matter, any one doubts me, and has the good luck to camp out long, and to have a variety of books of verse and prose, very soon, if dainty of taste, he will find that the artificial flavoring of some books is unpleasantly felt; but, after all, one does not read very much when living thus outside of houses. Books are then, of course, well to have, but rather as giving one texts for thoughts and talk than as preachers, counsellors, jesters, or friends.

In my own wood-life or canoe journeys I used to wonder how little I read or cared to read. One has nowadays many resources. If you sketch, no matter how badly, it teaches and even exacts that close observation of nature which brings in its train much that is to be desired.

Photography is a means of record, now so cheaply available as to be at the disposal of all, and there is a great charm of a winter evening in turning over sketch or photograph to recall anew the pleasant summer days. Beyond all this, there is botany. I knew a lady who combined it happily and ingeniously with photography, and so preserved pictures of plants in their flowering state. When you are out under starry skies with breadth of heaven in view, astronomy with an opera-glass—and Galileo's telescope was no better—is an agreeable temptation which the cheap and neat charts of the skies now to be readily obtained make very interesting.

I should advise any young woman, indeed, any one who has the good chance to live a camp-life, or to be much in the country, to keep a diary, not of events but of things. I find myself that I go back to my old note-books with increasing pleasure.

To make this resource available something more than the will to do it is necessary. Take any nice young girl, who is reasonably educated, afloat in your canoe with you, and ask her what she sees. As a rule she has a general sense that yonder yellow bank, tree-crowned above

the rippled water, is pleasant. The sky is blue, the sun falling behind you. She says it is beautiful and has a vague sense of enjoyment, and will carry away with her little more than this. Point out to her that the trees above are some of them deciduous poplars, or maples, and others sombre groups of pines and silky tamarack with a wonder of delicate tracery. Show her that the sun against the sloped yellow bank has covered the water with a shining changeful orange light, through which gleam the mottled stones below, and that the concave curve of every wave which faces us concentrates for the eye an unearthly sapphire the reflex of the darkening blue above us. Or a storm is on us at the same place. She is fearless as to the ducking from which even her waterproof will hardly protect. The clouds gather, the mists trail on the hills, ragged mosses on the trees hang in wet festoons of gray, and look in the misty distance like numberless cascades. It rains at last, a solid down-pour; certain tree-trunks grow black, and the shining beech and birch and poplar get a more vivid silver on their wet boles. The water is black like ink. It is no longer even translucent, and overhead the

red scourges of the lightning fly, and the great thunder-roar of smitten clouds rolls over us from hill to hill.

All these details you teach her and more, and paddle home with a mental cargo of fresh joys and delicious memories. My young friend is intelligent and clever, but she has never learned to observe. If she wants to know how, there is a book will help her. Let her take with her Ruskin's "Modern Painters." It will teach her much, not all. Nor do I know of any other volume which will tell her more.<sup>1</sup> Despite its faults, it has so many lessons in the modes of minute study of outside nature that it becomes a valuable friend. Although ostensibly written to aid artistic criticism, it does far more than this and yet not all. Other books which might seem desirable are less so because they are still more distinctly meant to teach or assist artists or amateurs. What is yet wanted is a little treatise on the methods of observing ex-

---

<sup>1</sup> "Fronde Agrestes," Ruskin, is a more handy book than "Modern Painters," but is only selections from the greater volumes recommended. "Deucalion" is yet harder reading, but will repay the careful reader.

terior nature. Above all it should be adapted to our own woods, skies, and waters. What to look for as a matter of pleasure, and how to see and record it, is a thing apart from such observation as leads to classification, and is scientific in its aims. It is somewhat remote also from the artist's study, which is a more complex business, and tends to learn what can be rendered by pencil or brush and what cannot. Its object at first is merely to give intelligent joy to the senses, to cultivate them into acuteness, and to impress on the mind such records as they ought to give us at their best.

Presuming the pupil to be like myself, powerless to use the pencil, she is to learn how to put on paper in words what she sees. The result will be what I may call *word-sketches*. Observe these are not to be for other eyes. They make her diary of things seen and worthy of note. Neither are they to be efforts to give elaborate descriptions. In the hands of a master, such use of words makes a picture in which often he sacrifices something, as the artist does, to get something else, and strives chiefly to leave on the mind one dominant emotion just as did the scene thus portrayed. A few words may do

this or it may be an elaborate work. The gift is a rare and great one. The word-paintings of Ruskin hang forever in one's mental gallery, strong, true, poetical, and capable of stirring you as the scenes described would have done, nay, even more, for a great word-master has stood interpretative between you and nature.

Miss Brontë was mistress of this art. Blackmore has it also. In some writers it is so lightly managed as to approach the sketch, and is more suggestive than fully descriptive. To see what I mean read the first few chapters of "Miss Angel," by Anna Thackeray. But a sketch by a trained and poetical observer is one thing; a sketch by a less gifted person is quite another. My pupil must be content with the simplest, most honest, unadorned record of things seen. Her training must look to this only.

What she should first seek to do is to be methodical and accurate and by and by fuller. If wise she will first limit herself to small scenes, and try to get notes of them somewhat in this fashion. She is, we suppose, on the bank of a stream. Her notes run as follows :

Date, time of day, place. Hills to either side and their character; a guess at their height; a

river below, swift, broken, or placid; the place of the sun, behind, in front, or overhead. Then the nature of the trees and how the light falls on them or in them, according to their kind. Next come color of wave and bank and sky, with questions as to water-tints and their causes. Last of all, and here she must be simple and natural, what mood of mind does it all bring to her, for every landscape has its capacity to leave you with some general sense of its awe, its beauty, its sadness, or its joyfulness.

Try this place again at some other hour, or in a storm, or under early morning light, and make like notes. If she should go on at this pleasant work, and one day return to the same spot, she will wonder how much more she has now learned to see.

Trees she will find an enchanting study. Let her take a group of them and endeavor to say on paper what makes each species so peculiar. The form, color, and expression of the boles are to be noted. A reader may smile at the phrase "expression," but look at a tattered old birch, or a silvery young beech-bole, "modest and maidenly, clean of limb," or a lightning-scarred pine. Tree-study has advantages because it is

always within reach. The axe has been so ruthlessly wielded that you must go far into the woods to get the best specimens of the pine, and the forests about our Maine lakes and in the Adirondacks have been sadly despoiled of their aristocrats. To see trees at their savage best one must go South, and seek the white-oaks of Carolina, the cypress of Florida, but the parks of Philadelphia and Baltimore afford splendid studies, and so also do the mountains of Virginia. Private taste and enterprise is saving already much that will be a joy to our children. A noble instance is the great wild park with which Colonel Parsons has protected the Natural Bridge in Virginia. I saw there an arbor-vitæ said by botanists to be not less than nine hundred years old, a chestnut twenty-six feet in girth at the height of my shoulders, and oaks past praise. But trees are everywhere, and if my observant pupil likes them, let her next note the mode in which the branches spread and their proportion to the trunk. State it all in the fewest words. It is to be only a help to memory. Then she comes to the leaf forms and the mode in which they are massed, their dulness or translucency, how sunshine affects their brilliancy, as



it is above or falls laterally at morn or eve. Perhaps she will note, too, on which the gray moss grows, and just in what forms, and how the mosses or lichens gather on the north side of trees and on what trees.

I may help my pupil if, like an artist teacher, I give one or two illustrations, copied *verbatim* from my note-books. The first was written next morning, as it is a brief record of a night scene.

Time, July 21, 1887, 9 P.M. Ristigouche River, New Brunswick, Canada. Black darkness. Hill outlines nearly lost in sky. River black, with flashing bits of white rapid; banks have grayish rocks, and so seem to be nearer than the dark stream limits. Sky looks level with hill-tops. Water seems to come up close. Effect of being in a concave valley of water, and all things draw in on me. Sense of awe. Camp-fire's red glare on water. Sudden opening lift of sky. Hills recede. Water-level falls. This is a barren, unadorned sketch, but it seems to tell the thing.

Or this, for a change. Newport. A beach. Time, August 1, 1887; 4 P.M. About me cleft rocks, cleavage straight through the embedded pebbles. Tones ruddy browns and grays. Gray beach. Sea-weed in heaps, deep pinks and pur-

ples. Boisterous waves, loaded with reddish seaweed, blue, with white crests, torn off in long ribbons by wind. Curious reds and blues as waves break, carrying sea-weed. Fierce gale off land. Dense fog, sun above it and to right. Everywhere yellow light. Sea strange dingy yellow. Leaves an unnatural green. Effect weird. Sense of unusualness.

Of course, such study of nature leads the intelligent to desire to know why the cleaved rock shows its sharp divisions as if cut by a knife, why yellow light gives such strangeness of tints, and thus draws on my pupil to larger explanatory studies. So much the better.

If when she bends over a foot-square area of mouldered tree-trunk, deep in the silence of a Maine wood, she has a craving to know the names and ways of the dozen mosses she notes, of the minute palm-like growths, of the odd toadstools, it will not lessen the joy this lili-putian representation of a tropical jungle gives to her. Nor will she like less the splendor of sunset tints on water to know the secrets of the pleasant tricks of refraction and reflection.

I do not want to make too much of a small matter. No doubt many people do this kind of

thing, but in most volumes of travel it is easy to see that the descriptions lack method, and show such want of training in observation as would not be noticeable had their authors gone through the modest studies I am now inviting my pupil to make.

Her temptation will be to note most the large, the grotesque, or the startling aspects of nature. In time these will be desirable as studies, but at first she must try smaller and limited sketches. They are as difficult, but do not change as do the grander scenes and objects. I knew a sick girl, who, bedfast for years, used to amuse herself with what her windows and an opera-glass commanded in the way of sky and foliage. The buds in spring-time, especially the horse-chestnuts, were the subject of quite curious notes, and cloud-forms an endless source of joy and puzzle to describe. One summer a great effort was made, and she was taken to the country, and a day or two later carried down near a brook, where they swung her hammock. I found her quite busy a week later, and happy in having discovered that the wave-curves over a rock were like the curves of some shells. My pupil will soon learn, as she did, that a good opera-

glass is indispensable. Let any one who has not tried it look with such a glass at sunset-decked water in motion. I am sure they will be startled by its beauty, and this especially if the surface be seen from a boat, because merely to look down on water is to make no acquaintance with its loveliness. A scroll of paper to limit the view and cut out side-lights also intensifies color.

The materials my pupil is to use are words, and words only. Constant dissatisfaction with the little they can tell us is the fate of all who use them. The sketcher, the great word-painter, and even the poet feels this when, like Browning, he seems so to suffer from their weakness as to be troubled into audacious employment of the words that will not obey his will, torment them as he may. Yet, as my pupil goes on, she will find her vocabulary growing, and will become more and more accurate in her use and more ingenious in her combination of words to give her meaning. As she learns to feel strongly—for she will in time—her love will give her increasing power both to see and to state what she sees, because this gentle passion for nature in all her moods is like a true-love affair, and grows by what it feeds upon.

When we come to sketch in words the rare and weird effects, the storm, the sunsets that seem not of earth, the cascade, or the ravage of the "windfall," it is wise not to be lured into fanciful word-painting, and the temptation is large. Yet the simplest expression of facts is then and for such rare occasions the best, and often by far the most forceful.

I venture, yet again, to give from a note-book of last year a few lines as to a sunset. I was on a steam-yacht awaiting the yachts which were racing for the Newport cup.

August 6, time, sunset; level sea; light breeze; fire-red sun on horizon; vast masses of intensely-lighted scarlet clouds; a broad track of fiery red on water; three yachts, with all sail set, coming over this sea of red towards us. Their sails are a vivid green. The vast mass of reds and scarlets give one a strange sense of terror as if something would happen. I could go on to expand upon "this color such as shall be in heaven," and on the sails which seemed to be green, but for the purpose of a sketch and to refresh the traitor memory in the future, the lines I wrote are enough and are yet baldly simple.

Out of this practice grow, as I have said, love of accuracy, larger insights, careful valuation of words, and also an increasing and more intelligent love of art in all its forms; nor will all these gains in the power to observe be without practical value in life.

I trust that I have said enough to tempt others to try each in their way to do what has been for me since boyhood a constant summer amusement.

THE END.



