

ORIGINAL CONTRIBUTIONS

THE ROLE OF THE ENDOCRINES IN THE PRODUCTION OF
MENTAL DISORDER.

BY H. CRICHTON MILLER, M.D., Ch. B.

THE title of this paper is ambitious; the paper itself is the reverse. I cannot claim to instruct my hearers, and I have no desire to provoke controversy. My sole aim is to stimulate thought along a line upon which a great deal of thinking is necessary before we reach the stage at which discussion becomes profitable.

I desire at the outset to express my deep indebtedness to Miss Katharine Pilkington, of the Royal Society of Medicine, without whose patient co-operation I could not have attempted to grapple with the extensive and frequently conflicting literature of the subject.

I will begin by drawing your attention to a few desultory points in psychopathology which are familiar to all of us.

Take, for instance, the rooted conviction—which is not by any means restricted to the laity, but is common among practitioners—that mental improvement can only be associated with increase of bodily weight. When we consider the great group of hypothyroidic mental cases we realise not merely that some patients can only recover mentally as they lose weight, but also that others must not be expected to change in weight during their recovery, because the increased activity of the thyroid neutralises the gain in weight due to an otherwise improved nutrition. I submit that the almost universal conception of mental recovery and weight-gaining calls for reservations if we think more frequently in terms of hormones.

Or take the case of the neuropathic girl, who generally reaches the neurologist or the psychotherapist when she is in her early twenties. How often the mother replies to questions about the patient's previous health: "She has always been the one in my family to take every disease that was going, from mumps to diphtheria." Are we to assume that the association of the psychoneurosis with a low resistance to infection is merely coincidence? If not—and I, for my part, am unable to do so—we must surely group together the psychoneurosis, the diathesis, an unsatisfactory endocrine equilibrium and a low immunising reaction.

Again, let us consider the connection between the growth of hair and mental disorder. Take three simple cases as examples: (1) The case of