

neuralgia, which I believe will also be found to hold good between rheumatism and chorea. I observed that the hereditary character of rheumatism, which is sometimes well marked, is associated with hereditary tendencies to nervous diseases of various kinds.

[After relating the history of a family illustrative of this in a marked degree, Dr. Anstie observes,]

But this is what I particularly wish to mention :—So far from the chorea universally occurring in the victims of rheumatism, it was often strikingly the reverse.

The prognosis of chorea has assumed a great importance to me in consequence of what I have seen in hospital and private practice; and surely, it is a subject much too lightly treated in the ordinary systematic works on medicine. No doubt there are men who appreciate all the gravity of the subject, but they are in a minority.

I have observed a large amount of suffering and disaster to the health of which chorea has either been the direct cause or at least the prophetic forerunner. I know of few things which would more incline me to think gravely of the future of a family than the fact that I had found it much invaded by chorea.

[Of the accidental causes of chorea.]

The most regular in its operation is insufficient food. Where this has been the main cause of the chorea, or the chief reasons why the chorea is severe, we may hope everything from the effects of copious and generous nutrition.

It is certain that where we can *permanently* raise the scale of nutrition of a patient who has been brought into chorea chiefly by starvation, we may often save his nervous health, once for all.

The next, and one of the gravest questions in estimating prognosis of chorea, is whether the affection occurs in the presexual period, or after puberty has commenced. No doubt every experienced practitioner is more or less aware of this fact, yet I think it is possible to show its magnitude and its importance more clearly than they are usually seen.

[Dr. Anstie then relates two cases in which recovery was due to the patients not having yet reached the perilous period of life which commences with puberty, and then continues:—]

In very gloomy contrast with these cases are others which I have been unfortunate enough to see in the course of my experience. One was a girl of 17, who had menstruated from the age of 13, always profusely. She came into Westminster Hospital, not looking half so ill as the little boy whom I have mentioned; but she had not slept for several days, and was in continual general choreic movement—head, arms, legs, features were in perpetual action. Another twenty-four hours of this made a fearful change; she got into an almost maniacal condition, and died perfectly worn out in three days from admission and in about twelve days from beginning of the illness.

In the next place let me say a few words on the influence which the facts of heredity ought to exert in shaping our prognosis of chorea. And in this respect there are two things to be considered—the

prognosis as to the result of the individual attack, and the prognosis as to the patient's future life. In respect to this, there are certain facts not commonly known, as I suppose. If the family from which the patient comes be on the whole strongly disposed to insanity, the chorea itself will not unfrequently be a trivial affair, but it is likely enough to be the first intimation of a coming mental degradation.

It occasionally happens that a boy or girl, born of a family which has numbered many nervously diseased and a few really able members, has chorea in childhood, but in place of getting intellectual harm from it, he seems to date from the period when it leaves him a most marked increase in his intellectual powers. It by no means follows that his moral nature will improve *parri passu*; indeed the spectacle of a "bullocky Orton" turning into a clever rogue like the Claimant, after a youth beset with chorea and semi-imbecility, is, I believe, less uncommon than would be supposed by most persons.

[Now as to the treatment of chorea.]

One broad assertion which is frequently made is, that simple chorea always runs its own course in either four, six, or eight weeks, and then leaves spontaneously. No doubt it does so in very many cases, yet the longer one studies chorea the more one finds that there are many exceptions to this. Not to speak of the pretty frequent cases where chorea, interrupted for the moment by the onset of some acute disease, returns with double vigour and implants itself with double tenacity in the enfeebled organism of the convalescent patient, there is a far from inconsiderable number of simple cases of chorea which tend to drag on beyond that period of three months which, as Jaccoud justly observes, marks the limit at which chorea passes into the intractable type. I have become convinced that there are several means by which at least the disease can be kept to the shorter and more normal term. And besides this, I do not doubt that we can sometimes intervene in the terrible acute cases, with the effect of saving life and preventing the patient from becoming imbecile or epileptic.

In commencing the subject of treatment it is necessary to remark that if embolism be considered the probable cause of any given case of chorea, medicinal treatment must surely be vain. Tonics and cod-liver oil may possibly be of some use in improving nutrition, but we must necessarily wait for the removal of the disease by natural processes. When, therefore, a person who is notoriously suffering from valvular disease of the heart suddenly gets an attack of some kind, paralytic or epileptic, and thereupon passes into a state of chorea, there can be no sense in adopting any special plan of treatment beyond that already indicated.

In the very numerous cases, however, in which there is neither rheumatism nor heart-disease present, we should be very foolish, in my opinion, to give up the attempt to interfere with the disease, and indeed the great discomfort which the patient suffers, and the alarm which his friends experience, will not allow us to fold our hands. I wish therefore to mention the few things which I have found