

respiratory movements and murmurs are normal. The area of hepatic dullness is rather enlarged and the splenic dullness seems also to be increased.

Subjectively the following symptoms are experienced: Various strange sensations in the scalp, a persistent headache, blurred vision at times, vertiginous feelings occurring irregularly and of varying severity, despondency, vague apprehensions, fear of places—especially of crowded assemblages, difficulty of deciding questions—very trivial or otherwise—in place of former promptness, impaired memory for persons, names and things.

Notwithstanding this extended list of symptoms Mr.—did not have an ill look, but, on the contrary, on superficial examination, appeared to be robust. To him and to his immediate family the situation seemed in a high degree alarming. The surrender of his position and his business interests was regarded as imminent. To the apprehension awakened by his head symptoms was added the diagnosis of cerebral congestion, and hence the profound melancholy into which he was plunged.

COMMENTARY.—My conclusion was that the disturbance in the functions of the brain and nervous system were secondary to derangement of the assimilative processes—of the primary and secondary assimilation—and that to the functional disorder thus caused are added the effects of introspection, and the realization by the centres of conscious impressions to an unusual extent, of ordinary peripheral excitations. My reasons for coming to this conclusion will appear hereafter. The remedies consisted in a careful regulation of the diet, in baths, exercise, in a reduction of the hours devoted to work, but not the cessation of work; in the use of a laxative quantity of sodium phosphate daily, and in the administration of the aqueous extract of ergot, with the chloride of gold and sodium, and a minute quantity of bichloride of mercury. If time and space would allow, the details of hygienic management—so important in these cases—could very profitably, I think, occupy our attention. But I must pass on to the next case.

CASE II.—THE ANÆMIC TYPE.

Mr. —, æt. 56; a lawyer by profession. His type of somatic constitution is the nervous-sanguine; weight, 145; height, 5 feet 9 inches. He has immense mental energy, extraordinary quickness of perception, a capital logical and critical faculty, and fine oratorical power. These native abilities, conjoined with extensive cultivation, soon placed him amongst the foremost men at the bar of the city where he practised, and have long maintained him in that position. For many years he has been a dyspeptic, and suffered much from eructations of gas, from acidity and flatulence. At times—months, even years intervening—he has experienced very severe seizures, accompanied by extreme mental depression, alternating with as extreme mental exaltation. During the past five years he has had two attacks of gout, neither severe nor protracted. During the whole course of his

professional life he has sustained no reverses, encountered no other anxieties than those of a successful lawyer, and has been rather singularly free, indeed, from the worries of life. Receiving last summer the nomination as a candidate to an important office, this cultivated gentleman, scholar and lawyer, this man of nice tastes and high tone, entered on a canvass marked by vituperation and slander to an unusual extent. About the same time some business interests became entangled, and caused no little worry. During the campaign he visited some malarious districts, and spoke several times at night in the open air. A speaker of great readiness and power, he never suffered from any considerable fatigue after public speaking, and hence he was now surprised to find himself exceedingly tired after even a brief effort. He began to have drenching night sweats, lost his appetite, grew weak, and was compelled to return home. It was then ascertained that he had malarial fever, and was treated accordingly. But at this time, and subsequently, symptoms not necessarily of malarial origin appeared. He became frightfully dyspeptic, had enormous eructations of gas, and very considerable flatulence; his arms and legs had a numb feeling, attended with "pins and needles;" he walked with some difficulty, partly because of weakness; she was somnolent and slept a good deal, and his spirits were extremely depressed, especially on awaking in the morning. During these periods of depression he was so overwhelmed with despondency that he was apprehensive he would lose his self-control entirely.

When he placed himself under my charge he had still a slight daily paroxysm of fever, the exacerbation occurring in the morning; but this disappeared in a few days, under the action of some efficient doses of quinine. He was very weak, pallid and emaciated, and slept a good deal of the time. He had no headache; his vision was rather dull, and ideas and speech slow. Every morning, on awaking, he was profoundly melancholic, and all the annoyances which the campaign had developed were gone over in his mind. He could talk of nothing else, think of nothing else, than his ill-feelings, and the disagreeable political and personal slanders of which he had been made the victim. He complained much of the numbness of his hands, of weakness in the limbs; and he talked incessantly of his depressed feelings. The bladder became irritable, and he was compelled to rise every two or three hours during the night, the urine being acid, and depositing heavily of uric acid. Presently the somnolence was displaced by insomnia, and he slept less and less, and rose in the morning haggard, exhausted, and horribly nervous and depressed. Ordinary hypnotics proved unequal to the effort to force sleep, and increasing doses of chloral became necessary. His mental activity, heretofore so remarkable, declined, and the effort to force his mind to the performance of any work, such as letter-writing, caused a sensa-