

tion passing beyond the limit of repair and thus producing a pathological condition of the cortex leading to permanent insanity by the injury to the cell. Upon this hypothesis, we must admit the possibility of a given case of insanity caused by irritation from a pelvic or other remote organ, persisting after the removal of the original cause. The intimate nervous connection between the brain and the sexual organs requires no demonstration, nor does the relationship existing between a physical state and that of local congestion and organic activity. In fact, the continuance of animal life depends upon such relationship, and the nervous channel through which such results are made possible is the same channel by means of which a local pelvic irritation may be the cause of cerebral congestion and produce an alteration of the normal cortical function giving rise to and indicated by abnormal mentality.

It is not within the scope of this paper to discuss the various pathological conditions of different organs that may stand towards insanity in the relationship of cause and effect, but to direct attention to the disease of the female organs as a factor of no small importance in this connection, not forgetting the fact that the principles herein stated and the deductions that follow have an application by no means indirect to the opposite sex.

It has been stated that insanity exercises a peculiar influence upon the sexual organs of women. Kirkley, of Toledo, states that out of 595 inmates of an asylum, 230 exhibited perverted sexual function, but he is silent as to the organic disease.

Another question of importance is in order, Do operations upon the female organs cause insanity? Within my knowledge of surgery in British Columbia, only one case has been known to follow any surgical operation, and that after abdominal section for tubercular peritonitis in a woman. At the meeting of the American Medical Association in 1898, Dr. Moyer, of Chicago, said "there was no difference in the nervous and mental effects following operations upon the pelvic organs from those following operations in other parts of the body."

Mundé, before the Women's Hospital Society, November, 1897, stated "in a certain number of cases I am sure that temporary mental disturbance within the first week or two (mutterings, delirium, hallucinations, melancholia) following the operation have been due to iodoform toxemia since the symptoms gradually subsided when the iodoform dressings were discontinued. Undoubtedly predisposition to hysteria and insanity plays a highly important role in the production of mental disturbances under physical and mental excitement