

of despondency. Unfortunately, this condition is very frequently neglected, partly because of its simplicity, and partly by not being considered in the light of mental disease. A few days more, and this case is one of open melancholia.

Under very different conditions you meet with cases of a similar nature where domestic troubles or pecuniary losses are the immediate cause of the mental symptoms. Here, again, there is the initial stage, often of long duration, and during which preventive measures are of the greatest value. Allow these cases to drift a little further until the borderland of insanity is reached, and their downward course is almost inevitable.

I have no doubt you will all recall numbers of such cases, and what I wish to impress upon you is the necessity and importance of employing early and preventive measures. Delay and neglect may mean disaster.

Then there is the case of the young girl, who, at the period of a great physiological crisis, experiences feelings and sensations at once beyond her comprehension and understanding, and which she allows to disturb her peace of mind until the current of her thoughts no longer represent the buoyancy of her girlhood.

As too often happens, mothers are unmindful of the critical stage of their child's life, and the general treatment is neither consoling nor refreshing. I know of no stage in woman's life when greater care or wiser counsels are needed. Neglect may mean early mental troubles, or it may mean a life of incessant misery, because of the early planting of neurotic seeds. I mention this class of cases because, from time to time, one sees so many young girls whose illness dates from the menstrual epoch, and where, I am confident, much more might be done to avert the development of mental disease; and, again, because there is an increasing tendency to the development of neurotic and mental symptoms at this anxious stage of life in the present or rising generation of young women.

You are frequently consulted respecting the schoolboy or schoolgirl who suffers from intolerable headache, who cannot sleep, who cries and frets because of his or her inability to accomplish home tasks or keep an equal place with others in the class. In short, the child is absolutely miserable, and the seeds of disease are being rooted, through the misguided rules or laws of primary education, and through the failure of teachers to allow for any difference in brain power or any defect in brain development.

I must allude to one other class where the earliest symptoms of mental disease are specially your property, and in which class I believe are many preventable deaths. It only needs mention to save description of the number of deaths where the coroner directs the jury to find a verdict of "suicide (or as the case may be) while of unsound

mind." We have not to borrow examples from other countries, nor even from other counties, for there are numbers within our own small radius in the course of the year. Signs of warning and symptoms of danger are either unheeded or disbelieved, and nothing short of an actual attempt convinces the relative and others of the serious nature of the case.

The course of events in these cases illustrates forcibly the difference between the professional and lay methods of reasoning respecting the nature and importance of the earliest symptoms of mental disease. The profession recognise in these premonitory symptoms the precursors of disease, if not the actual symbols of disease; but the public pooh-pooh this, and only awaken to the truth when the laws of society are palpably disregarded, or when the community are startled by a daring and irresponsible attempt at self-destruction or murder. It is hard to know on whom to fix the blame in many of these sad terminations to previous useful lives, but of this I am quite certain, a great and grave duty is that of the family physician. He may with impunity refuse to sign lunacy certificates, but by no twist of the imagination can he escape from responsibility when dealing with the early symptoms of mental disease.

*Treatment.*—In considering the question of treatment, it may be laid down as a general principle that it is useless to ransack the *Pharmacopœia* or to combine reputed drugs in the hope of finding a panacea. You can at best correct system errors by therapeutics, but I know of no drug that will cure mental disease. It is not therapeutics but moral treatment that is required. One time it is healthy exercise, another recreation, another change of surroundings, another removal from all associations with relatives, another regulation of diet and hours—in short, let your prescription be moral and not therapeutical, and, at the risk of being abused and chastised, let the time-honoured battle of physis give place to preventive medicine. I may be told that you have no means of treating these symptoms other than by therapeutics; but this I cannot accept, and, as I have already said, drugs are, if not useless, of little value.

As our knowledge of the pathology of disease advances, our faith in curative measures grows less. There are a few grand examples, but do not the weight of evidence and the bent of scientific research favour the adoption of preventive, rather than curative, measures? Here are the trenchant words of Professor Clifford Allbutt: "But what need of further evidence to prove that while the advance of curative medicine is readily summed up in a few brilliant episodes, the advance of preventive medicine is along the whole line with a steady and uniform tide that knows no ebb?" Dr. Clouston says, "If the first signs that betoken