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Myers, D. Campbell.

NEURASTHENIA.

BY D. CAMPBELL MYERS, M.D., M.R.C.S. ENG. L.R.C.P. LOND*

Neurologist to St. Michael's Hospital and Simco: St. Dispensary, Toronto.

This is so extensive a subject that it would be impossible to discuss in the limited time at our disposal, more than few points in regard to it. Our increasing knowledge of the subject will ere long lead to a division of this multiform disease which only a few years ago was unmentioned in our text books, but the importance of which, leads to the necessity of further classification, so that some distinguishing name would indicate the special form of neurasthenia under consideration. The analogy; between the term neurasthenia, and that of Bright's disease, is striking and just as in the latter we have conditions which originally indicated kidney disease in general, so we have in neurasthenia, a term indicating an affection of the nervous system, but as Bright's disease was later classified into various kidney troubles as known to-day, so will time and further knowledge more clearly designate divisions in what we now term neurasthenia, a change which is urgently demanded from a clinical standpoint. As already stated, the limited time to-day will only allow of the discussion of the some of the phases of neurasthenia, and of these I would like to draw your attention to two of the most important. (1) The so-called "spinal irritation" and (2) the mental results of certain forms of this affection. In regard to spinal irritation, it was long supposed to be due to a lesion of the spinal cord or meninges, and this led the earlier authors, (notably among whom we find Rosenthal), seeking to explain its pathology in this manner, to classify it with diseases of the spinal cord. That this is an error, is, I think, now generally conceded; Bouveret among other having expressed himself very positively on this point. A consideration of the facts shows the correctness of this negative view. But it was to a more definite solution of the problem of the seat of spinal irritation that I hoped to direct your attention to-day, and this is, that instead of the trouble being due to changes in the spinal cord or local structures, I believe that it in reality is *psychical*. This belief has been forced on me, in the first place by the nature of the pain complained of. The hyperesthesia is fully as intense as is met with in hysteria, which is avowedly an affection of the higher centres. Cases of this nature frequently occur, in which the slightest touch on the vertebral column or on either side of it calls forth expressions of the most intense pain. I recall one in which I directed the nurse to begin tapping the spine gently with two rubber balls mounted like hammers, and in a few days the patient could bear quite a severe pounding with these balls without any complaint, in

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