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NEUROLOGY AND THE PREVENTION OF
INSANITY IN THE POOR.*

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MR. PRESIDENT AND FELLOWS,—In a recent article on "The Present Status of Neurology," by Dr. Joseph Collins, of New York, he states that the progress in neurology during the last twenty years has been so gratifying, that to-day the correct diagnosis of organic diseases of the nervous system is more directly dependent upon the application of rules of scientific exactitude, than in any other department of internal medicine. Despite this fact there is no denying that a remarkable stagnation in neurology has come about. This stagnation he attributes to the disappointment of our expectations that the laboratory worker, experimenter, and pathologist would contribute to the elucidation of the origin and course of nervous disease, and also to the fact that there are no signs tending to indicate that we can look to them for much help in the future. As a matter of fact, he says that the neurologist must look to himself in the interpretation of diseases of the nervous system, and no longer pin his faith to the physiologist or pathologist. In other words, the advances of neurology must, in the future, be made on clinical lines and by clinical study.

It is not my intention at present to even attempt to discuss the broad field of neurology, but rather to make a few remarks about a portion only of this field which, though of supreme importance, has been comparatively little cultivated, of which Krafft-Ebing wrote, "It is astonishing that so little notice has hitherto been given in medical literature," and in which clinical study must form the chief reliance of the neurologist. I refer to disease in that portion of the field of neurology which on the one side is bounded by nervous health, and on the other by that boundary line after passing which it is termed insanity. This disease has been discussed both as neurasthenia and as incipient insanity. While personally, as I advocated in an earlier paper, I believe a more correct designation for it would be cerebraesthesia or that subdivision of neurasthenia in which mental symptoms predominate, the more frequent use of the name, neurasthenia, by the profession at present leads me to employ this latter term in these remarks. The importance of this branch of nervous disease is at once apparent when we

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