

slow to repair, and who may easily be put beyond possibility of repair. Sharply defined spaces of loss of memory are characteristic more of hysteria than of neurasthenia.

In hypochondriasis I have touched on one cardinal distinction, viz., a fixed idea of their own trouble, whether or not it is compatible with their symptoms. If under argument they are made to admit they are wrong, they merely shift their position, only to take up another equally foolish and to them impregnable. They exaggerate all their symptoms, and may in time even become insane, and end their trouble in insanity. I do not mean to say that hypochondriasis is always a step towards insanity. Self-seclusion is a symptom of hypochondriasis, melancholia or insanity, rather than neurasthenia.

In a neurasthenic with constant melancholia, the prognosis for early recovery is bad. Morbid ideas are fixed and primary..

In insanity, the patient may not be alive thoroughly to his condition, and prolonged rest may merely be followed by exacerbation of some untoward symptom, which is the opposite to that found in neurasthenia. The latter is only too alive to his exhausted condition, and rest always ameliorates his symptoms.

The prognosis in neurasthenia depends on the ability of the patient to carry out thorough and rational treatment. Also any accompanying conditions of the body, such as dyspepsia, anemia, sluggish condition of intestinal tract, etc.

It is a question whether a patient who has lost almost completely his nerve reserve ever regains it completely. He seems to fall down comparatively easily, when an extra draft is made on his nervous energy, and becomes for a second or third time a nervous bankrupt.

*Treatment.*—To sum this up in as short a space as possible, we treat the nerve bankrupt in the same relative way that we do a financial bankrupt who is anxious to regain his credit in the bank, viz., cut off all controllable nerve expense and live on the minimum amount, laying by the rest as a reserve fund. Now, what are controllable expenses?

As it takes an amount of nerve energy to run the musculature and keep up the necessary tonus, this expense can be reduced by putting the patient in the horizontal position and keeping him there. By the judicious use of massage he is enabled to remain in bed with impunity for a protracted period and handle a large amount of nourishment.

Let me express my disapproval of the extravagant way that so many ladies use that therapeutic agent, massage. They im-