

Dr. Gillette saw the patient and advised that nothing be done unless the wire caused trouble, and none followed for three months, when a pain in the epigastrium was experienced, and a little later a sharp pain in the cardiac end of the stomach. In a day after this pain the end of the wire was found protruding under the skin in the ninth intercostal space, and was removed by a forceps.

### NEURASTHENIA.

Physicians should be careful about telling unmarried females that they are affected by "neurasthenia." A prominent authority (Freund) in the *Wiener Klinische Wochenschrift*—it's of foreign origin and therefore must be so!—declares that every case of neurasthenia depends upon some abnormal occurrence or occurrences in the sexual life of the patient at the present time or since puberty. He scouts the idea that mental overwork or excess of household cares can alone induce neurasthenia, altho' any depressing factor may affect its development. He even insists that absorbing occupations, especially intellectual, protect against the evolution of neurasthenic affections. He divides them into: (1) Neurasthenia proper, which he claims can always be traced to excessive masturbation, unnatural sexual intercourse, etc. (2) "Anxiety neurasthenia," distinguished by dread, restlessness, agoraphobia, vertigo in walking, sleeplessness, etc. The latter form, he states, can also invariably be traced to sexual influences in the nature of unsatisfied impulses, coitus interruptus, abstinence with inflamed desires, etc. He protests against the prevailing hypocrisy in regard to sexual matters and urges the physician to assume that abnormal sexual life is of chief import in the etiology of neurasthenia, as this alone will help him to treat it rationally, after winning his patient's confidence. In cases absolutely impossible to trace to any abnormal sexual occurrences, he decides that the affection is not neurasthenia; and by eliminating this conception he has discovered unsuspected local affections, in one instance a latent suppuration in one of the accessory nasal cavities, which had only produced neurasthenic symptoms, entirely cured by an operation. In all of which there is probably a great deal of truth, after all.—*American Journal of Surgery and Gynecology*, October 7th, 1898.

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Apropos to the craze for removal of the stomach, *Atlantic Medical Monthly* prints an original poem written in "James Whitecomb Riley English:"

I dunno what we're comin' to, it does beat all, ter see  
 What things these doctor fellers do; it's got so now, by gee,  
 They take a feller's liver'n lights and all his innerds out