

This is rendered the more likely because the catarrh is very apt to escape recognition in its earlier stages.

Certainly the statistics given by M. Langenhagen upon this point are in accordance with my own observations. He states that although a distinct neurotic element existed in all but eleven out of his five hundred and sixty cases, in only eight cases was there true neurasthenia prior to onset of the intestinal trouble. He adds his opinion that while neurasthenia cannot be regarded as a cause, in the great majority of the cases membranous colitis occurs in persons with a "nervous and arthritic predisposition."

Further, it is noticeable that the nervous symptoms seem to follow rather than precede exacerbations of the disease, and similarly that as recovery takes place they seem to disappear because the bowel symptoms improve, and not vice versa. Also in the slighter cases decided catarrhal signs can exist unaccompanied by any nervous manifestations.

The association in these cases of an excessive amount of intestinal mucus with gastric hypersecretion is interesting as suggesting the possibility of the nervous system taking a prominent part in the causation of the disease, but in the two cases where I have seen this condition well marked, the hypersecretion yielded at once to "antiarthritic" treatment and to diet. In none of my cases have I found it necessary to adopt treatment mainly directed to the nervous system, as would have been the case were the condition a pure neurosis.

Another possibility as to the causation of this disease is that micro-organisms play an important part in the intestinal irritation. The fact that the remedies which are most effective for the cure of this disease are intestinal antiseptics, in addition to being antirheumatic ones, is not out of harmony with this theory, but more work needs to be done in this direction before this theory can be accepted or disproved.

Constipation is another etiological factor upon which stress is sometimes laid, but here again, we have a symptom and not a cause. A strong argument against constipation as a prime factor is the frequency of this condition and the comparative infrequency of colon catarrh. We occasionally see a little mucus coating scybalous masses in constipation, and the mucous is not improbably due to irritation of the colon by the retained fecal masses, but this does not seem to form the starting-point of catarrh. Another point is that the dietetic treatment adapted to the curing of ordinary constipation aggravates colon catarrh and tends to increase the constipation.

Other etiological factors may be found in exposure to cold