

PRACTICAL MEDICINE.

HYPOCHONDRIASIS.

This disease or misery is the subject of a lecture delivered by Dr. Chambers at St. Mary's Hospital, and published in the *British Medical Journal*. Dr. Chambers says bodily pain is not misery; but this last is 'a constitutional disease, idiopathic, not dependent upon external circumstances for its origin.' According to the nomenclature of the College of Physicians, hypochondriasis is defined as 'some disturbance of the bodily health, attended with exaggerated ideas or depressed feelings, but without actual disorder of the intellect.' This definition does not quite satisfy Dr. Chambers, as he is of opinion that the disturbance of the bodily health does not always precede (as the definition might lead one to expect) the deranged feelings, but that in a great many cases 'the pasty tongue, the difficulty of swallowing, the loss of appetite, the painful and slow digestion of the stomach, the flatulence in the bowels, the weak, languid circulation, the loss of adipose tissue, and in long cases the atrophy of the heart, liver, pancreas, are consequences of the imperfect innervation.' The hypochondriac regards the present as worse than the past or the future—'hora novissima, tempora pessima.' The suddenness of the attacks is noteworthy, as in the case of John Bunyan, who was a very good type of a hypochondriac. Dr. Chambers remarks that 'a vague idea of impending evil very frequently accompanies the misery, and sometimes (as in Bunyan's case) it takes the concrete form of a dread of hell, and thoughts about devils.' Hypochondriasis may occur at any age, sometimes appearing very early in life. 'Often it comes on in manhood, rarely after the meridian of life.' There is generally a family history either of some neurosis, as insanity, hysteria, or of chronic invalidism.

Hypochondriacs are not wanting in intellect, usually quite the reverse. Dr. Chambers has 'not found hypochondriasis oftener preceded by excess of brain-work or of desk work, than by athletic training.'

A temporary loss of power in the voluntary muscles of a part, or more often of the whole body, paresis subitanea, is a common symptom in this disease. This paralysis affects most frequently the lower extremities; there is no anaesthesia, not even giddiness. 'The patient can stand, but he cannot go. These attacks of paresis come on in fine bright weather, just the opposite of what one would expect.

Hypochondriacs generally complain of pain, which is not of a sharp, stabbing neuralgic character, but a dull sort of burning sensation, deeply seated in the interior of the body. It moves about but slowly, and when it begins to move is usually moving off. Sometimes what the patient calls a 'scratching' or a 'scraping,' and which

pathologists Latinise into 'formication,' is felt more superficially than the deep burning. The back of the head and neck, the soles of the feet, the palms of the hands, are favourite points for this sensation; but some also describe it as occurring in the abdomen. A feeling of weight in the rectum, in the uterus, or in the bladder, is often experienced, though they may be all no fuller than natural.

Hypochondriacs suffer from constipated bowels, owing to the paresis subitanea affecting the involuntary muscular fibres. Patients also complain of gaseous distension of the intestines, the gas not being the product of decomposition in the tube, but consisting chiefly of atmospheric air and carbonic acid exhaled from the blood. Indigestion is not an essential feature of hypochondriasis, although it may arise if paresis of the bowels be long continued or frequently repeated.

In protracted cases of hypochondriasis, there is almost invariably a loss of weight during the attacks, which quickly disappears on a normal condition of feeling being recovered. There is frequently derangement of the male genital functions in this disease. The urine is wanting in its normal acidity, and its specific gravity is variable. It often contains crystals of calcium oxalate, and an excessive quantity of renal and vesical epithelium. 'Mucus also often is formed in excess in the urethra, and is squeezed out during straining at stool, or even stains the linen.'

Hypochondriacs generally consider themselves the victims of some organic disease, which has no real existence.

Hypochondriasis sometimes, though rarely, affects women. Patients labouring under the disease are for the most part truthful and confiding.

With regard to the pathology of hypochondriasis, Dr. Chambers regards it as a 'drain upon the voluntary nerve-force beyond the supply,' the supply being deficient in this disease, which probably has its seat in the grey matter of the nervous centres. Sometimes the cure of piles and ulceration of the rectum will also cure hypochondriasis.

Dr. Chambers divides the treatment of this disease into physical and moral. The physical measures he recommends are such as tend to keep up the due nutrition of the nerve substance. Devonshire cream, bacon, olive oil, pancreatic emulsion, or cod-liver oil, the last-named being the best if the stomach can tolerate it. Strychnine and henbane may be required to improve the digestion. A large amount of bodily rest is necessary for some patients; exertion frequently retarding recovery.

To prevent constipation of the bowels, which the excess of rest is apt to produce, Dr. Chambers recommends green vegetables, salads, taraxacum, or salted water taken as a regular diet. If these do not suffice, a pill containing one-eighth of a grain of extract of belladonna com-

bined with one grain of aloes may be given occasionally.

With respect to the moral treatment of the disease, the patient must be encouraged to be hopeful as regards the future. Much may be done for hypochondriacs by interesting them in thoughtful works of charity, and by leading them to ornament life with beauty and pleasure. They must hate ugliness in any shape, not for their own sake, but for that of others.

Dr. Chambers tells us that the medical treatment must be combined with the moral; neither alone is generally sufficient for a cure. The patient should not be advised to give up his usual occupation, as idleness is even much worse than worrying hard work. Opiates and alcohol are only admissible in those cases of hypochondriasis in which there is an actual deficiency of sleep, confirmed by independent evidence. But the sedative that is chosen must be given in very small doses, and, above all, must not be increased.

SURGERY.

ELECTROLYSIS IN SURGERY.

Dr. Groh, Prof. of Clinical Surgery in the University of Olmutz, has made an important contribution to electro-surgery, in which he relates the results of his clinical experience of the effects of electrolysis. He has modified the method of application introduced by Dr. Althaus, inasmuch as he does not make exclusive use of the negative electrode, but inserts the positive likewise into the tumour. The author uses Fromhold's battery, which consists of zinc, lead, and platinum moor; and resorts to a powerful current applied for a short time under chloroform, or to a gentle current for days and nights consecutively. The needles which he employs are either of steel, zinc, or platinum; and he finds it advantageous, where the parts which are to be destroyed are highly vascular, to use zinc needles which are dissolved at the positive pole by the nascent chlorine, so that there is not only primary but secondary electrolysis. The eschar at the positive pole looks under these circumstances like one produced by ordinary chloride of zinc paste; viz., it is a greyish white, firm, and dry. At the negative pole there is a rapid development of foam (hydrogen) which generally appears white, and more rarely brownish red, this chiefly where the tissues are very vascular. The tissues become more tense by the quantity of gas which is set free, and the epidermis or mucous membrane becomes raised; discolouration of the tissues appears at first round the needles, but afterwards at a distance, and they assume a dark brown or livid tinge. Where this is distinctly perceptible, there is generally so much destruction that the tissues do not recover themselves after the application has been discontinued. The author thinks