

gastric ulcer, gallstones, chronic appendicitis, latent carcinoma, ovarian disease, arteriosclerosis, larval Graves' disease, latent tubercle, etc., may be the underlying cause of a host of nervous epiphenomena, which mask the primary condition, and unless extreme care be exercised, lead to serious errors in diagnosis and treatment. It is therefore obvious that a symptomatic labelling of a case as neurasthenia is a very incomplete diagnosis. How unfortunate and irrational it would be to recommend the rest cure or psychotherapy for the treatment of these secondary cases. The necessity for individualizing and making an etiological diagnosis is therefore apparent. In no condition is the statement more applicable that we must consider the patient and not the disease.

In both primary and secondary cases the personal equation of the patient is of paramount importance, and must be carefully estimated. Heredity and early training are the chief factors determining the nerve capital with which the individual is furnished to meet the requirements of later life. Some are born with a reserve of nervous energy which enables them to bear up under the keenest stress of the struggle for existence. Others from the beginning are on the verge of nerve bankruptcy, the balance turning on the slightest provocation. Between these extremes all grades of nervous stability exist. Health is maintained so long as the nervous capacity (personal equation) acting against the stress of surrounding conditions, is capable of meeting the demands made upon it. Broadly speaking, normal nervous function may, therefore, be stated to be a condition of equipoise between nervous capacity and environment. In a given case hereditary neuropathic tendency, hysteria, epilepsy, chorea, alcoholism, syphilis, the ties, etc., in the patient's antecedents are very important in relation to his susceptibility to nervous exhaustion. Of the two factors, personal equation and environment, the former is the patient's hereditary portion, and as such is beyond the power of therapeutic alteration. Speaking generally, it may be conserved or dissipated, according to the external conditions acting upon him. Environment is the only variable factor, and to it we must look for the exciting causes of the disease, and only in so far as we can modify it have we any power of therapeutic control. These facts, so well emphasized by Cohnheim, with reference to disease in general, appear at first glance remarkable, but they will stand close investigation. The great importance, therefore, of the closest study of the patient's environment is readily appreciated. In this connection we must recognize not only a physical but a mental and moral