

TRANSLATOR'S INTRODUCTION. xxiii.

Again, the connection between neurasthenia and degeneracy explains the mistaken diagnoses dealt with in Part III, ch. 5. The diseases confounded with neurasthenia major are, like it, founded on a basis of neurasthenia minor, and so display the "neurastheniform" symptoms of which Prof. Ballet speaks.

It also explains the relation, mentioned on p. 124, between the neurosis of anxiety and neurasthenia.

Finally, it affords an explanation of the connection between neurasthenia and enteroptosis, which seems to me more satisfactory than either that of Glénard (p. 283) or that of Bouveret (p. 284), and which, unlike the theories of these observers, serves also to explain why such conditions as mobile heart, uterine displacements (in nulliparæ), spinal curvature, flat-foot, varicocele and perhaps genu valgum, are more common in neurasthenics than in normal subjects. Among the fairly common signs of degeneracy are want of muscular tone and hyperplasia of connective tissue, resulting in laxity of attachments; two conditions which suffice to account for enteroptosis and the other pathological states just mentioned.¹

In this connection, it is interesting to observe that Prof. Ballet makes a distinction between

¹ See article on *Neurasthenia, Degeneracy, and Mobile Organs*, by the translator, in *Brit. Med. Journ.*, March 3rd, 1906.