

supply keeps the cells irritable from insufficient or unbalanced nutrition, and the symptoms peripherally are in accordance with the central changes.

Neurasthenia may be confounded with the early stage of some forms of mental disease, as with general paresis, for instance; but in neurasthenia though there is difficulty in the mental processes, there is no absolute failure, the patient retains the reasoning power, can perform acts and adjust himself to his surroundings. In neurasthenia, without demonstrable pathological change in the nervous system, we have a condition of simple pathological depression in which, as Bevan Lewis states it, "there is a failure in object consciousness which invariably inaugurates a corresponding rise in subject consciousness and which we have reason to infer implies a diminished functional activity in those realms of the cerebrum correlated thereto."

There is nothing more debilitating mentally and physically than self-pity, and we find this attitude of mind accentuated in neurasthenia. With all the thoughts and interests of the patient centered within, it is difficult, if not impossible, to bring about a natural, healthful condition of the body generally. This mental depression and preoccupation correspondingly depress all the organic functions. You cannot have a good circulation when the mind is occupied with a fear of insanity, or apprehends an approaching disorder of unknown character. Nor will the gastric secretions be normally produced nor act normally under such conditions.

For the time being the patient's mind must be taken possession of, and dominated. The inability to make decisions must be met by the physician, the thoughts and feelings, as well as actions of the patient, must be controlled and directed by healthful suggestions. These suggestions must be varied to meet the different conditions. As the degree of fatigue will vary, so will the symptoms, and the necessity for outside influence, to put the mental functions in motion. The mental inertia must be overcome but always judiciously, the underlying pathology of fatigue—exhaustion—being kept in mind.

First, then, must be won the confidence of the patient and a careful examination generally accomplishes this. Having this confidence and being able to assure the patient the condition is not a serious one, time, with proper treatment, will give a successful issue to the case.

In extreme cases the pure rest treatment, according to Mitchell, or to Playfair, must be employed for a time. Then gradually the time in bed is reduced, voluntary exercise is prescribed and some mental diversion added according to the nature of the case.

In a great number of cases it is not necessary, neither is it best, to interdict all work, either mental or physical, but the patient may be