

of the lateral columns of the cord in Charcot's well known case of a woman who died after many years of persistent contracture of the limbs.

In the light of modern pathology, it is claimed by many that no disease can be regarded as functional, but it is still the most convenient and probably the best term we have to apply to those various conditions and manifestations of disease which present no known change in the structure of the organ or organs whose functions are perverted, and therefore we must still speak of hysteria as a functional affection.

Whatever this functional derangement of the higher centres may be, it produces a disturbance of the proper balance between the higher functions of the brain, and is equivalent in most cases to a want of self-control, to a giving away to the feelings, and in its effects upon the lower centres it probably acts as Stephen MacKenzie holds by causing a suspension of functions in the so-called inhibitory centres, in this way giving rise to uncontrolled functional activity on the part of the motor, sensory or vaso-motor systems.

Walton, Voigt, Rosenthal and others claim that the various hysterical manifestations are due to anæmia of the centres involved owing to temporary vaso-motor contraction, and in support of this theory point to the peculiar irritability of the vaso motor system in this disease. Most authorities, however, incline to the view that molecular changes take place in the central nervous system, temporary in duration and not to be detected by any known methods of examination. Certainly whatever the conditions are the lesions cannot be of an organic nature, such as inflammation or sclerosis, or we could not account for the sudden recoveries in hysterical cases of the gravest kind.

Though we cannot resist entertaining the idea of some possible or even probable undiscovered structural change and must still be content to regard it as a functional disorder, it is undoubtedly a real malady which is to a large extent beyond the influence of the patient's will. The loss of control is genuine in most cases and is only regained by some profound impression upon the

higher centres: not voluntarily recalled by the patient, for in many instances there is an actual paralysis of the will, or, as Sir James Paget puts it, the patient might truly say, "I cannot will."

In many cases of hysteria the psychological features are of such a nature and predominate to such an extent as to suggest insanity as a possible element in the case, and undoubtedly, as Osler says, "The disease occupies the ill-defined territory between sanity and insanity."

It is in many cases impossible to draw the line between these two conditions, many hysterics exhibiting a condition of moral degradation and a tendency to deceive and lie to an extent that can only be accounted for by their having crossed the border line. Again, these resemblances are not infrequently reinforced by various hallucinations and delusions on the part of the neurotic patient. The mental symptoms of course vary widely in different cases, but I believe that a psychological element is or has been present in every case of hysteria even when the manifestations are apparently purely physical.

Hysteria is almost unknown among the barbarous races, and seems to be a product of the higher cerebral development of civilization. The most severe types are probably seen in France, though Guiteras states that the severe forms with mental and motor symptoms are extraordinarily frequent among the Cubans.

Hysteria is much more frequent in females than in males, Briquet's figures being 20 to 1 but inasmuch as many of the cases of so-called hypochondriasis in men are hysteria, these figures probably indicate too great a disproportion. The disease may in men be characterized by any of the forms common to women, and some of the most severe and intractable cases are met with in members of the male sex.

No age is exempt from this disease. It has occurred in a child of three years and again in extreme old age, but it is especially frequent at certain periods of life. In the following table Briquet and Landouzy give the percentage number of cases in each decade.