

ferred intensely. When the operation was over I asked him which had caused him more suffering, the fracture or the pain he had had in his left shoulder. He immediately replied the pain in the shoulder, and I knew his character too well to doubt his statement for an instant.

Why are these symptoms of neurasthenia often treated so lightly? I believe it is due to the fact that a hiatus in medical education has always existed in the domain of neurology under consideration. The student has excellent works on insanity written on this disease after the boundary line has been passed, but previous to this stage he has but little. A single chapter on neurasthenia in the recent text-books of medicine, written with about as much warmth as neurasthenic patients are welcomed to the wards of a general hospital, is probably all the average student reads about it. As for clinical instruction this is scanty if not altogether absent. What then must be the logical result? He goes into general practice where these troubles are common without any definite knowledge of this form of functional nervous disease, gropes about in the dark for a variable number of years, and finally grows to look upon them as whimsical, chimerical, etc., gives up their study in utter disappointment, or learns often by sad experience, both to himself and his patient, how serious some of these troubles are. Having devoted my entire attention to neurology for nearly fifteen years, a branch of medicine of which these cases of neurasthenia form an important quota, and having had exceptional opportunities during the past twelve years in a private hospital, with the aid of a large staff of nurses, to study these patients, to observe the various phases of their disease from day to day, to see, in some it is true, a gradual intensity of their symptoms develop until the boundary line was passed and they were transferred to the care of an alienist, or in, I am pleased to say, a much greater number, to observe a gradual abatement of their symptoms and a return to a life of usefulness, has not only confirmed the belief I had already formed of their gravity, but also led me to believe that by their early treatment, insanity could be prevented, both of which conclusions I had the honor of laying before the Canadian Medical Association in 1898. If I add that such patients have frequently told me that they would prefer to have either pneumonia or typhoid fever to the disease from which they were suffering, some idea of the serious nature of these troubles to such patients will readily be realized.

Before proceeding further I would like to say a few words about insanity, since it is on the field above mentioned that the neurologist and the alienist most frequently meet in the practice of their respective specialties. Although insanity is