

**ON THE NATURE AND  
TREATMENT OF HEREDITARY  
DISEASE WITH REFERENCE TO A  
CORRELATION OF MORBIFIC  
FORCES**

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On the nature and treatment of hereditary disease with reference to a correlation of morbidic forces by J. M. Winn

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NATURE AND TREATMENT  
OF  
HEREDITARY DISEASE

WITH REFERENCE TO A  
CORRELATION OF MORBIFIC FORCES

BY  
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TO  
W. R. GROVE, ESQ. Q.C. V.P.R.S.

ETC.

This Essay is Dedicated

BY

THE AUTHOR

4 HARLEY PLACE, HARLEY STREET  
Dec. 14, 1868





## THE NATURE AND TREATMENT OF HEREDITARY DISEASE.

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EVERY MEDICAL MAN conversant with the treatment of insanity, and who has had opportunities of knowing intimately the family connections of his patients, can scarcely have failed to detect, after careful enquiry, evidence of some form of constitutional disease, in one or more members of the same family. If he has not discovered the existence of decided insanity—for friends and relatives generally endeavour to conceal such fact—he will most probably have learnt, that few have escaped some hereditary taint, developed in the form of phthisis, scrofula, or epilepsy. Not only is this vicarious action of morbid forces seen in different members of the same family, but it is also frequently met with in the same individual.

In the course of my own experience I have often found the symptoms of insanity supervene on the subsidence of disease of the lungs ; and, in the same manner, phthisis has followed the recovery from different forms of mental disease. Still more remarkable has been the manner in which I have seen skin disease alternate with attacks of insanity. These facts forcibly suggest a correlation of *morbific* forces.

I could adduce an endless variety of instances in support of this theory, but they are of such frequent occurrence, and must have fallen so often under the observation of medical men, that I shall content myself with mentioning only a few ; and in relating these, I shall briefly notice only the salient points in each case.

Psoriasis, followed by acute mania. Mrs. —, æt. forty, had been troubled for many years with a scaly eruption on the arms and back. A short time before I saw her (when she was acutely insane) the rash had disappeared. In a few weeks after she had been under my care, the maniacal symptoms subsided, and about the same time the psoriasis reappeared.

Epilepsy, acute mania, and phthisis, in children of one family. Miss —, when fifteen years of age, had unequivocal symptoms of phthisis. Her brother was attacked with acute mania when he was nineteen ; and another sister with epileptic fits at the age of seventeen. Two of their cousins and their aunt died of phthisis.

Phthisis, followed by acute mania. Mr. —, æt. twenty-four, was advised to go to a warmer climate, on account of decided symptoms of a cavity in one lung. Whilst abroad, the lung disease was arrested. This amendment was speedily followed by an attack of acute mania ; and when I first saw him he was incoherently insane, but the cavity in the lung had completely healed.

Religious mania, succeeded by phthisis. Miss —, æt. nineteen. In this case, the malady had been developed by a mistaken and fanatical zeal on the part of her religious instructors. Although her life had been one of the

most perfect innocence and purity, she fancied herself wicked and sinful. She ultimately died of phthisis.

Scrofula, followed by suicidal melancholia. Miss —, æt. twenty-five. This young lady had been a martyr to strumous ailments, which eventuated in an acute form of suicidal melancholia. She completely recovered, and when I saw her, two years afterwards, had had no return of scrofulous or insane symptoms.

Phthisis in one generation; monomania in the next. Miss —, æt. twenty-seven. This was a case of chronic monomania of suspicion. Her uncle died of phthisis.

Melancholia in the father; scrofula and phthisis in the daughter. Count —, a very distinguished foreigner, and a man of brilliant talent, became insane in after life, and died in a French asylum. His daughter, a very scrofulous child, died of phthisis when she was only ten years of age. As far as I could ascertain, there was no constitutional taint on the mother's side.

Consumption and mania in seven children of one family. Mr. —, æt. about twenty-five, consulted me for an attack of profound melancholia. He was one of a family of eight children. One sister and two brothers died of phthisis, two sisters died insane, and one sister (still living) is extremely eccentric; only one sister has escaped disease. The mother died of pulmonary consumption. The father, who had been in every respect healthy, died at the age of eighty-three.

In the cases which I have enumerated, reference has been made to only one group of hereditary diseases, viz.: —mania, epilepsy, phthisis, scrofula, and skin diseases