

**'CHANGE' AS A  
MENTAL  
RESTORATIVE**

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'Change' as a mental restorative by Joseph Mortimer-Granville

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# "CHANGE"

AS A

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BY

JOSEPH MORTIMER-GRANVILLE.



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## "CHANGE"

### AS A MENTAL RESTORATIVE.

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THERE is too often, it must be feared, a lack of clearly-defined purpose in the medical prescription of "change" as a mental restorative. Vague terms, for example, relief, rest, quiet; and figurative phrases, such as "taking off the strain," "breaking the monotony," and "setting up again," are employed to designate the remedy and the effect it is intended to produce; but there is no more precise notion of the way in which benefit will result than is represented by the popular expression, "It will do good!" A plan of treatment so extensively adopted, and at times so inconvenient and costly, as ordering a patient "away for change," ought to be fully understood and specifically applied. That it is not either the one or the other may be inferred from the almost empiricism with which it is recommended, particularly in cases that have baffled other expedients for their cure; and from the very large proportion of instances in which the remedy fails, and evil rather than good is entailed on the sufferer. Let us attempt the study of three common and typical cases, remembering that it is the duty of the physician not only to do his best for his patient, but to assure himself that nothing better can be done for him; and, above all things, to ascertain clearly *what* it is he desires to do, and *how* it may be most directly accomplished.

## CASE I.

A. was verging on middle-life, and held a position of high trust and responsibility in an old-established house of business, where the transactions were considerable and involved large interests, but were not speculative. His duties were managerial and arithmetical, such as would tax the brain-powers of a less experienced man, but by practice he had come to perform them almost automatically. His figure-work resembled that of a calculating machine, and when a process was commenced by the Will it could be carried out subconsciously. The greater part of his daily business was of a routine character, and the intellectual strain caused by it could not at any time during the previous ten years have been great. He had some domestic trouble about a year and a half before the date of which I speak, but seemed to have recovered from its depressing effects. Nevertheless he had practically "broken down." His work had become a toil. He worried over it, and laboured through it with distaste and weariness, and he had begun to make mistakes. There were no indications of cardiac, lung, or any other variety of organic disease. His general health was fairly good, with the exception of slight stomach symptoms, ascribed to "dyspepsia." He slept without trouble when once he fell asleep, but was apt to lie awake anxiously thinking for what seemed a long period before forgetting himself, and awoke unrefreshed and slowly in the morning, complaining of a creeping sensation in the back of the head and nape of the neck, which lasted an hour or more after assuming the erect position, but then gradually subsided, leaving a sensation of numbness which he described as "extending over the whole brain." The circulation was weak, the breathing somewhat laboured and interspersed with sighs. The skin had the appearance of being dirty and mottled. The extremities were alternately cold and hot, and there



were local perspirations. Position in bed, or even when sitting in a chair, had a strangely marked effect on the local surface temperature, and doubtless on the blood-supply of the deeper structures. The eyes were slightly injected, but sleepy-looking. The pupils changed too tardily under the influence of light. There was a little knitting of the brows—the token of mental effort—when thinking before answering a question; and an air of lassitude and general despondency prevailed. He was "nervous" and irritable, started at any sudden noise or intrusion, and was excited to passion with an impulse to abuse or strike those around him after any strong muscular exercise—for example, hastening to catch a train. He brooded over the past and had gloomy forebodings of the future, cared nothing for society, and without being really ill or obliged to give up his work, he feared that he would be compelled to do so, and having a family—which he began to lose interest in, and to look upon as a burden—this was an additional source of uneasiness. He had been prescribed chloral to procure sleep, bromide of potassium with the same object, and nux vomica as a muscular tonic, all without permanent benefit. "Change" was now recommended. It was practically impossible for him to obtain more than a brief holiday, say a month at the outside; and he had taken such a holiday in the autumn of the previous year without any appreciable benefit, although his condition was, presumably, at that time more amenable to the effects of "change" than it could be expected to be now when the same remedy was again prescribed.

The mental state—with which, of course, is inseparably connected the nerve-state—of a person in the condition described is essentially one of failure of energy as distinguished from exhaustion of strength. When routine duty which has long been easy becomes difficult this is often the fact. There has been no augmentation of the demand for mind- and nerve-force; but the

ordinary supply has failed; not because there is no *strength*, but because there is little *energy*. In practice this is a very important discrimination, and one which it should not be difficult to make. It follows that change cannot be needed for the sake of *rest*. Automatic work—which is the sort of work in which A. had been chiefly engaged—generally becomes less exacting every year. The nervous centres, or combinations, formed by the repetition of the same series of mento-physical actions, are consolidated and strengthened by functional exercise, until in process of time work which in itself may appear complicated and difficult, comes to be simple and effortless. Work that a man has done for years with ease cannot have suddenly become "over-work," unless the state and strength of the worker have wholly changed. The condition of a worker like A. *has* changed; his task is really lighter to him than it used to be, but he has lost the power necessary for its performance; just as the effective *weight* on a common lever may be reduced by lengthening the long arm; but if the *power* is also diminished the proportional gain will not be realized.

This being made clear, the question arises whether it was physical strength or mental energy that A. had lost? If it had been "physical strength"—using that term as synonymous with nerve-power—there should have been some evidences of physical disease to account for the weakness. A careful review of the symptoms noted will, however, show that not one of the number—in the absence of a strongly-marked indication—pointed to a physical cause. Even the want of force in the circulation, with deficient oxygenation of the blood, the dyspeptic symptoms, the slight local stagnations with corresponding sensations, and the atonic condition of the blood-vessels, betokened a vaso-motor depression which was more likely to be the result of want of tone than of actual weakness, and there was an entire absence

of any formulated disease in the organism. Knowing, therefore, the important part which mental energy—using that term to denote mind-force—plays in the maintenance of health, it was reasonable to conclude that it was this he lacked. The centres whereby *force* is supplied to the nervous system, and through it again to the organism as a whole, were failing to perform their functions, and there is no part of the psycho-physical being which may not suffer from such a cause.

It is useless to tell a man in this state to "rouse and exert" himself. He *cannot* shake off his malaise. He is as much ill as the patient who lies prostrate with fever and ague. The energy which would be required to supply the motor force of *self-recovery* is wanting. The disease consists in the drying up of the springs of vitality. Change may do good; it is probably the best remedy to use, but "change" is a generic term like "tonic," and we need to determine precisely what form of change each particular case requires before we can intelligently prescribe it. The obvious indication in the case of A. was to stimulate the centres which generate force, or from which, so to say, force springs—the centres of *vitality*. It is as impossible, in the present state of our knowledge, to ascertain the nature of these centres, as to discover where they are situated; but that it is not impossible to reach and influence them is proved by the circumstance that we do, now and then, accidentally hit on the sort of change a patient requires, and so use "change as a mental restorative."

Among the considerations which should guide the judgment in its selection of a form of change are, I believe, the following. Mere "change of air" is nothing to a man who is in physically good health. It will not produce any better or more lasting effect than the endeavour to recover his strength by administering *nux vomica* for the muscular system. "Change of scene" is not more likely