CLINICAL LECTURES ON NEURASTHENIA

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Clinical Lectures on Neurasthenia by Thomas Dixon Savill

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FOURTH EDITION

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WORKS BY THE SAME AUTHOR.

Translation of Prof. J. M. Charoov's Lectures on Diseases of the Nervous System (Third Series). New Sydenman Society, London, 1889.

On an Epidemic Skin Disease.

London, 1893.

A System of Clinical Medicine, dealing with the diagnosis, prognosis, and treatment of disease (Two Volumes).

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Leosures on Meteria.

In the Press, 1908.

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Dedication

TO

THE LATE

JOHN HENRY BRIDGES,

UNDER WHOSE ABLE GUIDANCE
THE METROPOLITAN WORKHOUSE INFIRMARIES
WERE POUNDED AND ORGANISED,
WHOSE MANY ACTS OF KINDNESS HAVE
BARNED THE LASTING ESTEEM AND REGARD OF
THE AUTHOR,

PREFACE TO THE FIRST EDITION

(March, 1899)

THE first of these lectures was delivered as part of the postgraduate course which was organised at the Paddington Infirmary in the year 1891. All the other lectures were delivered at the Welbeck Street Hospital for Diseases of the Nervous System, during more recent years, and formed part of the post-graduate course of lectures delivered by different members of the staff. Some of them appeared in *The Clinical Journal*; and it was at the suggestion of several friends that they are now collected and published.

I more readily acceded to this suggestion for three reasons. In the first place, I wished to appeal to a wider audience on a topic always interesting to me, namely, the wealth of clinical material—especially of mental and nervous disorders—in the Metropolitan Workhouses and Infirmaries. Secondly, it has always seemed to me that the profession has taken an unjustifiably hopeless view concerning the curability of diseases of the nervous system in general, and of the so-called functional disorders, which form so large a part of them in practice, in particular. And, thirdly, it is surely a mistake that the study of neurasthenia, and the methods of coping with the various, and often trivial, symptoms which these patients present, should be omitted from current text-books. As a result of this, not only do many curable patients go unrelieved, but a good number have recourse to charlatans.

In preparing these lectures for the press the details of the cases have been considerably amplified, their number supplemented, and the whole has been carefully revised as it passed through the press. Exception may be taken to an absence of reference to the views and works of others. But these lectures do not aim at being anything more than a record of personal experience. The omission—if the absence of such references can be counted an omission in clinical lectures—is remedied to some extent by an Addendum and Bibliography, which has been prepared under my supervision, by Miss Agnes F. Blackadder, M.D., to whom I am also indebted for valuable assistance in the work of revision. Without her aid these lectures would probably not have seen the light for many years to come.

PREFACE TO THE FOURTH EDITION

It is a source of satisfaction to find that neurasthenia is now receiving more attention and occupying a worthier place in current works on Systematic Medicine.

The studies and observations on which these lectures were based were initiated at the Paddington Infirmary at a time when the disorder had received but scant attention, between 1885 and 1892, and they were continued at the Hospital for Diseases of the Nervous System, Welbeck Street. The view that a large proportion of cases of neurasthenia are dependent on some specific auto-infective process, which I believe I was the first to put forward, in 1896 and 1897, was then at variance with the current teaching of the day. Most of the highest authorities then held that neurasthenia was purely and primarily a nervous exhaustion to be met by nerve tonics and other remedies directed solely to the nervous system. Since that date my conclusions have received the support of several contemporary writers.

There are, however, still many observers who adhere to the old view. Some regard it as a mild form of insanity. There are also quite a number who consider that "neurasthenia is essentially an affection of the mind," and that it can only be treated satisfactorily by psychological methods. This hardly embodies my conception of neurasthenia, which presents in most instances both mental and physical symptoms. Undoubtedly mental symptoms may predominate, but the clinical picture of the disease points rather to a derangement of the entire nervous system—brain, spinal cord, peripheral nerves, and sympathetic system. Whatever its origin the change in the nervous system is undoubtedly a generalised one; this is a fundamental fact of prime importance.

The problem which I set before me was to ascertain what was the pathological cause underlying this generalised de-

rangement of the nervous system, and my investigations into the etiology of neurasthenia have led me to the conclusions, first, that there exists in all neurasthenics some degree of weakness of the nervous system, inherent or acquired, which renders the nervous system vulnerable; and secondly, that this may be developed into neurasthenia by a great variety of determining causes. Among such determining causes, undoubtedly, in a certain number of instances, a mental element plays the leading rôle and may even be the sole factor, such for example as overwork of mind or body, grief, prolonged pain, mental strain, or some other cause intrinsically nervous in origin. In these cases, relatively few in number, the disease might perhaps be said to be essentially an affection of the mind, so far as its origin is concerned. I do not deny the influence of the mind upon the body-a fact which has been so ably demonstrated by the late Dr. Hack Tuke 1 and others. In such cases psychotherapy must necessarily play a leading part in the treatment. A note on the psychic treatment of neurasthenia has been added to this edition.

However, I could not regard the foregoing as the sole explanation of all or even the majority of cases of neurasthenia, and a laborious investigation and analysis of infirmary and hospital cases first led me to the conclusion that the gastro-intestinal symptoms, which several eminent observers had hitherto

¹ The Influence of the Mind upon the Body, Dr. Hack Tuke. Churchill, London, 1884.

regarded as part of the neurasthenia, were antecedent to the neurasthenic symptoms in point of time. The numerous instances met with led me to infer a causal relationship between the gastro-intestinal derangement and the neurasthenia. I was further led to conclude, by data given in Lecture IV, that this gastro-intestinal disorder acted on the nervous system as a toxemia, an auto-intoxication. I also found that other better recognised auto-intoxications—chronic suppurative conditions for instance—were capable of acting precisely in the same way in the production of neurasthenia.

In the fresh series of facts submitted in Lecture VIII in the last and the present editions, these questions have been investigated anew, and an analysis of 103 private cases of neurasthenia showed that about 80 per cent. were due to some kind of auto-intoxication. Among such auto-intoxications may be mentioned intestinal derangement, gastric disorder, chronic appendicitis, pyorrhœa alveolaris, oral sepsis, blenorrhagia, antral disease, chronic alcoholism, excessive tobacco smoking, and incipient phthisis. In 38 per cent. of these cases the neurasthenia was due to various, often very obscure, kinds of intestinal derangement, and a critical examination of these leads me to hope that the chemistry and bacteriology of the alimentary tract, which await further investigation, may throw further light on the pathology of neurasthenia. I am now (1908) testing the efficacy of vaccines made from the prevailing intestinal microbe found in the stools of such patients.

To my reviewers in this and other countries I would respectfully offer my acknowledgment of their courtesy and indulgence. Some consider that I regard neurasthenia too much as a symptomatic disorder, i.e., as a symptom of many other diseases. It is true that I do regard neurasthenia as indicative in a large number of cases, though not in all, of pathological