HYSTERICAL DISORDERS OF WARFARE

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PREFACE

In acceding to Dr. Yealland's request that I should write a short preface to this volume, I was influenced by a desire to lay before the reader some facts about the author and his methods of treatment which otherwise might be overlooked, and to emphasise certain deductions which may fairly be drawn from his experience.

Before taking up the post of Resident Medical Officer at the National Hospital two years ago, Dr. Yealland's interest in psychological problems had been aroused by a period of Asylum work in Canada. It was his wish to supplement this experience by a study of neurology, and he has certainly made the most of the opportunities afforded him in London for this purpose. At the same time the allotment of a number of beds in the Hospital to soldiers who were suffering from hysterical disorders made the question of how quickly these patients could be restored to health and usefulness a matter of urgency. He threw himself into the solution of this problem with characteristic energy, and soon realised that what may be called an intensive method of treatment gave better results than the more prolonged measures generally adopted.

His principle has been a straightforward one, and is based on the belief that a disorder originating in suggestion should yield to counter-suggestion, that the precise method of counter-suggestion is really immaterial so long as it is strong enough, and that the line of treatment must be varied according to the mental attitude of the patient. His success has proved that in skilful and determined hands the time-honoured employment of a faradic battery as an implement of suggestion is at least as efficacious as hypnosis or ether anæsthesia, and that resort to the latter alternatives, with their obvious disadvantages, is rarely, if ever, necessary.

It need scarcely be pointed out that this success does not depend on the implement, but on the personality of the medical man who employs it. The latter must possess sympathy, understanding, tact, imperturbable good temper and untiring determination, in addition to a sense of humour and the ability to meet unlooked for situations as they arise with ready decision.

It is not enough to know how to cure an hysterical disorder; the question of when to apply the treatment is at least as important. Patients who have recently passed through a period of great strain and who show symptoms of exhaustion must be allowed a spell of rest before undergoing treatment if the latter is to give the best results. But, the decision having been made that the time for treatment has arrived, the task should be undertaken

with the determination to bring it to a successful issue at one sitting however much time may be required. An understanding with the patient on this point at the onset has often been found of value.

The following pages contain much of interest, but I venture to predict that their chief attraction will be found in the detailed accounts of what may be called the author's encounters with his patients—encounters which have ended with almost monotonous success to one side, but always with feelings of good will on both.

It may be asked whether the cure of an hysterical disorder by such methods as are here described is associated with benefit to the patient's mental outlook or by any effect, good or bad, on his psychopathic condition. Some critics will doubtless say that a more prolonged and a more reasoned reeducation must produce a more beneficial and a more lasting effect. This must remain an open question for the present, but there seems no good evidence forthcoming to support the view that any therapeutic measures can alter the temperamental instability of these patients, and it is clear that the intensive method of treatment, in many cases at any rate, produces very welcome changes in their mental attitude coincident with the removal of their physical disabilities.

If the lessons herein contained are generally learned, we may hope to become less familiar with the picture of a physician ordering faradism to an hysterical patient, with no further interest as to who applies the treatment or whether he or she understands the why or the wherefore of its application.

Should this war of nations serve no other good purpose, it must surely have stimulated a more universal and keener interest in psychotherapy, a department of medicine which has hitherto been sadly neglected if not purposely shunned. The functional disorders of the nervous system produced by war conditions are essentially the same as, though more numerous than, those met with in periods of peace, and it is time that steps for their sympathetic and scientific treatment, available for all classes of society, should be taken.

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AUTHOR'S PREFACE

The number of hysterical patients admitted to the National Hospital, Queen Square, has materially increased subsequent to the appearance of an article in the Lancet* by Captain E. D. Adrian and myself. Many inquiries by those interested in the subject have led to practical demonstrations of the treatment employed. My success in treating these cases, together with encouragement from those who have witnessed my methods, has stimulated me to produce this neurological record.

I have been fortunate in having at my disposal a wealth of clinical material, in the military and civilian patients of the hospital, which has included, not only hysterical disorders, but also disorders due to structural change in the cerebrospinal nervous system. It has therefore been possible to compare clinically these two conditions. A prolonged study of individual cases during the process of treatment has afforded me an opportunity of studying the reaction of each patient until recovery has been fully established. The terms hysterical

^{* &}quot;The Treatment of Some Common War Neuroscs," June 9, 1917, pp. 367 to 872.