Different Methods of Treatment of Hysteria.

by

Thomas Rhodes, M.B., C.M., 1884

University Medallist in Materia Medica
Class Honours First Class in Various Subjects of Curriculum.

General Practitioner 5 years

Medical Officer for No. 7 District of Preston Union.
Before I consider the treatment of this chronic and obstinate disease, let me just remind you of its leading causes and symptoms. There is no doubt about it being a chronic for it may last as long as the patient himself—in fact, it often continues until some other fatal disease attacks her.

With few exceptions it is confined to the female sex and especially between the ages of 15-35. It is thought to be caused by irritations of the ovaries or the rapid development of the ovaries. But whatever the cause, hereditary plays an important part.

The pathology of this common disease is very acute, owing principally to the fact that few or none ever die of it alone; but although death is rare, yet it is in my opinion one of the most important illnesses which comes under the observation of the physician, and which tests his faith and judgment to a remarkable degree. For if the consultant treats his patient too lightly, he is condemned, either for want...
Of sympathy, or that "he did not understand my complaint".

These patients are unusually sensitive as to their illness, and therefore must be carefully and seriously considered.

Their complaint are invariable and vary not only in one case from those of another, but each case will vary in its symptoms from day to day and even from hour to hour.

The long string of subjective symptoms are well-known to you such as hyperaesthesia or anæsthesia of various parts of the body - hyperalgesia and analgesia - the typical chronic hysteria - the globus hystericus - paralysia of the various muscles & nerves -

The special senses are preserved - The vegetative system is disturbed - fluctuations of heat & cold - The nervous system especially suffering, such as numbness, tingling, pains to paralyses of various joints - The limbs being even affected by pseudo-paralysia or pseudohemiplegia - paralysia of the vocal cords etc etc - In fact, there is scarcely any known organic
disease which can not be simulated by the hysterical patient involuntarily so that it is first of all important that we exclude all organic diseases before our treatment is commenced.

Then assuming that we have a case of hysteria to deal with, what is our treatment to be? The hypnotist might blame either the uterus or its appendages for all the disturbances of the nervous system. The patient might be told the uterus was bent or turned a little to one side or another, backwards or forwards. Hypnosis plays a role, hot water douche, prolonged rest, a penicillin introduced, but only in a few cases is any permanent benefit received. If benefit is secured, then it was not a case of hysteria, for I consider hysteria to be of central origin with no organic disease present. In many cases where the above treatment has been adopted the patient is worse. For the central nervous system has not been treated. Its controlling inhibiting cells being weaker or in abeyance.
There is also the operative treatment removing the ovaries. This practice has been much done lately by Fell of Birmingham and Imsha of Liverpool. But although I admire the.

These gentlemen for many things, yet I cannot help think that it is wise to adopt this mode of treatment in uncomplicated hysteria. One case I have in my mind when it removed one or both ovaries for this complaint and the patient is worse than before and is under treatment at the present time. This case (although it came from anything by one case) is one in my opinion sufficient to condemn the operation, but there is a moral aspect, which I need not here discuss, but which is obvious to all, much condemn it also even more emphatically than its failure.

I come now to the treatment by drugs. What can we do by these? The answer is that there is no known drug or combination of drugs which we can prescribe...
Which will conquer this obstinate illness.

Dr. Buggard says, (Emans Dictionary 1867) medicines can do but little for the individual. But probably the greatest amount of benefit is derived from her surroundings. "A girl who has not spoken above a whisper for months, will often recover her natural tone of voice in a week, if placed under the judicious discipline of strangers."

Thus we may reason. The physician, and prescribe the bromides, fomentations, antiperentics, and all our known antiperspirations, yet find our patient one day better another day worse, just as before the treatment. We may attend to her prince Tuesday give her tonics, and she will perhaps be better for a little while and relapse into as bad a state as before. Phosphorus, calomel, Ignatia, brochures, Cuming's (Medical Annual 1867) but with little or no benefit. The patient does not always return and inform us that she is no better, but consult another physician, who perhaps
goes through. The same phrenological remedies but flavored differently. They send his patients away for change of air — and thus get rid of his patient for a time. This may lead her to some hydropathic institution and she may receive benefit from the combined effects of water, air, and new social surroundings. Or she may not, and assert on her return that the air was too strong for her or that the water treatment was killing her.

Of course it is within the experience of most of us, that the patient often receives benefit whilst under the most inert treatment, e.g. she may be taking some medicines, and suddenly recover, but I hold that her intellectual recovery is due to suggestive treatment which I shall mention later on.

I now come to the one of the most important and considered the most successful modes of treatment — viz. "The New Mitchell Plan." The main factor consisting in
1) exclusion of patients and absolute exclusion of all but
The medical attendant and nurse.
(1) [3. Absolute rest in bed.
(3) A systematic extra-funding of the patient.
(4) Use of massage and electricity.

This mode of treatment I can conceive will be successful, if it can be carried out, to the letter, but unfortunately for this plan, the factors cannot be enforced in all cases.

In the class of patients (working class) which come under my care, it is totally out of the question. Because they cannot afford a nurse, and as could not have the patient secluded. All the points in this plan of treatment, I have tried to enforce in two special cases which I wish to draw your attention. They could not afford a nurse, and as to making the relatives act as a trained nurse, ought to do, without emotion and without undue sympathy, it is impossible. Friends will call to see them, and do not fail to express themselves in words which ought to have been left unsaid, e.g. They will say "My dear, how ill you..."
are looking and other damaging remarks.

Then as to absolute rest in bed.
This is utterly useless, unless, combined with total exclusion. Far better send them out into the fresh air. Of course, there are cases where there is such extreme prostration that there is no other way of doing but letting them lie in bed for a time. But these are exceptional.

The one finding is difficult also to enforce when you have a sympathetic relative or nurse. They judge from is not better them after spending some time in making it. So get tired, and then the patient, after a short time, has to put up with and wish for regular meals coming round.

The manage of electricity, I found would not be permissible with, for more than a couple of weeks. So that this plan of treatment is totally unsuitable for this class of patients with whom I am dealing.

I allow, that for the better middle class or the upper class
patients it is likely to be successful provided the physician or nurse have the qualities that are necessary for these troublesome patients.

But these qualities bring me to a point of treatment which I wish to bring before your notice, and that is "treatment by suggestion."

This plan of treatment is now being adopted extensively in other countries but particularly as at Nancy, so much so that it is designated the "Nancy" treatment.

In Holland there is at least one properly qualified practitioner in every town who uses this system openly and extensively.

Its position is secured also in Germany, Russia, and Sweden, being adopted by leading physicians.

Lloyd Teale, M.D., says (Psychos-therapeutics):

"The dangers of hypnosis have been found proved to be

chimerical, in proper hands no undesirable medical

results can occur through its practice, and there is no

reliable case of it being used for a criminal purpose in

"
The countries where it is most frequently employed by medical men, more than this can hardly be said for any system of medical treatment.

This "Nancy" treatment consists first in hypnotising the patient, and directing his attention to the part complained of, then suggesting the disappearance of the morbid condition.

The mode of hypnotising practised by Dr. Lischultz at his dispensary at Nancy is as follows (Tuckey, Psychopharmac.) 1869. p. 23.

"The patient paying his first visit is directed to sit down and watch the treatment being applied to others. This gives him confidence and arouses that imitative faculty which is so active in childhood and is never lost throughout life. When the time comes he is told to take his place..."
in the armchair, and to make his mind as much a blank as possible—"to think of nothing at all," and to fix his eyes and attention on some special object—almost anything will do, from the operators face to a mark on the ceiling or pattern of the carpet. Then the phenomena which attend the oncoming of natural sleep are gradually suggested to him—such as your sight is growing dim and indistinct—your eyelids are becoming heavy—a murmuring is creeping over your limbs—a heavy voice appears muffled to you—now you are getting more sleepy—now you cannot keep your eyes open. Here the eyes close of themselves or are closed by the operator, and it is found that the patient is indeed asleep. About two minutes of this talk about sleep will
usually produce the hypnotic effect on a new patient.

The patient being more or less influenced Dr. Lichardt now proceeds with the treatment proper.

This consists essentially in directing the invalid's attention to the part affected and suggesting its removal and as a rule the subjective symptoms will have disappeared.

Dr. Lichardt (Psychologist) gives several cases of hysteria (with other diseases) where the treatment was highly successful; and I can testify from actual observation of this treatment by suggestion to the benefit received by two of my cases which had defied all the previous treatment (mentioned before) by many doctors and myself.

CASE I. A.G. Oct 35. Consulted one for the first time in Jan 1885. I had not been
in practice

many months. Then, and I
had abundant time to study
her case. She has been under
me for treatment ever since.
Her surroundings at home were
good as regards food, etc.,
but the family was highly
unsanitary. She had had no
previous real illness. The
present illness commenced
ten years before I saw her.
She having consulted several
medical men until she
had exhausted all her
means, patience and
confidence.

General Fact. Depression of
face was carminous and
pale with drooping eyelids
and thin. Neuralgic tempera-
ment was well marked.

Alimentary System - Life red
and teeth good. Tongue clean.
Brevities of mouth good. Appetite
poor. Troubled with flatulence.
The other points of this system
were normal.

Hemopoietic, circulatory, Respiring,
Integumentary, Urinary, & Reproductive systems were all normal.
With regard to all these systems she had complained of something connected with each, for instance, someone had put in a hodgepodge (albeit a Virginia) thinking that would cure her but on the contrary, it drew her attention to that part still more and she was worse.

Vermin - Sensations of pain, heat, cold, or felt on one side of chest or another. Also in hands or feet. Number can present in various parts but scarcely ever in the same place two days together.


In short, every system was normal, but there was scarcely a day but she complained of something new and which might be indicative of some organic disease, but from physical examinations made repeatedly and with great care, no disease...
could be detected.

A medical friend of mine who happened to be present when this patient came to see me and before whom I laid the facts of her case proposed the suggestive treatment as he had practiced it with success before. Of course I readily consented. Having tried everything I knew of,

We adopted Lister's method, but with success you will learn after the first trial of the suggestive treatment she was improved. In fact she said she was alright then and asked why in cord not have done it at first and as prevented her from suffering (?) all those years. However, she was daily operated on and late since gained in flesh has more control over herself, having more confidence in herself, is able to go about her ordinary duties with a hale, heed without them being a burden to her.

It is some months since I saw her but have heard she is
going on alright.

Case II. was somewhat similar to the former in the leading symptoms, but these had not troubled her for so long a period. Here things did not benefit her, and she was treated in a similar way with a little result.

Brit med Jour. 1887. p. 1304. gives a case in Bicêtre Hospital cured by this suggestive treatment.

Among the numerous theories which have been advanced to account for the influence of hypnotic suggestion that of Professor Delboeuf of Liège (Vide de l'origine des effets curatifs de l'hypnotisme. 1887.) is interesting.

(1) He supposes that in an early stage of existence the organic functions may have been under the control of the will and consciousness.

(2) That in process of evolution the increasing influence and attraction excited by the environment
Caused this controlling power to become weaker and fall into abeyance.

(3) That in the hypnotic state the faculties are no longer occupied with external things, but may be directed and concentrated on one or more of the internal organs or functions.

(4) That then the power which has never been completely lost is again exercised for a short time.

To show that control may still be exerted at times over organic processes, he relates how during a long dental operation he was able to restrain the salivary secretion by directing his attention to this function.

The well-known case of Colonel Townsend also illustrates this theory, where he could die or expire when he pleased, and yet by an effort or some word he could come to life again.
with regard to treatment by suggestion there is no doubt but that a great deal can be done by it in suitable cases. Everyone must have had abundant proof of the power the mind has over the body. Some instances in this treatment go as far as to assert that the mind can cure organic diseases. I cannot join them in this extent. It would require something more than a mere statement to convince me, that a diseased mitral valve was transformed into a healthy normal one, or that a malignant growth was withered up by simply the influence of the mind.

Many of our successful physicians owe their success partly to their force of character, and this power enables to gain the confidence of their patients. Their treatment will often be on the suggestive plane. They say to their patients: ‘Take
This will do you a great deal of good; and it often does so.

Dr. Roth, the well-known pioneer of Swedish gymnastics in England days, has been using "suggestion" without using "suggestion" during all his life, and many of us do it unconsciously. There is no doubt in my mind that it is one sure way of removing these functional disturbances of the nervous system.

This subject is a fitting one for the medical schools to take up at their respective hospitals. Mr. Charcot practices it extensively at the Salpêtrière. He and Mr. Richet have had many patients submitted to this treatment with excellent results.

Braid of Manchester many years ago practiced hypnosis without suggestion. In it there is power and that power might do, in uncompassionate hands, a great
deal of harm, but in the hands of trustworthy men a great deal of good. Of course this could equally apply to the case of chloroform.

Dr. Otto G. Bletterstald. (Hypnosis in Practical Medicine, also Brit Med Jour 1888 p. 493). Considers hysterical people less sensitive to hypnotic impression than others. This is contrary to the general opinion. He concludes this pamphlet by saying that suggestive Therapeutics is one of the most brilliant methods of contemporary Science.

I cannot go the length that Dr. Tucker does. I do not think hypnosis should be practiced by nearly every medical man at the present time. I consider that the people are not ready for this kind of treatment which has been in this country at any rate, mostly practiced and abused by charlatans. - Let the hospital...
adopt it, then the practicenes
will follow. Who would care
to stake his reputation for the
sake of relieving the patients
who come to you with imaginary
complaints? I prefer to follow
the practicenes and suggestion
without the influence of hypotnes
for the treatment of hypotnes -

my excuse, eis, in bringing
this subject before your
notice in this thesis is
that considering the "Nancy"
treatment is being so much
discussed in some circles,
I thought I could give you
my clinical observations on
it; and that it would be
a subject that had not
been ever written about.

I write also to remind you, in
conclusion, (in order that, I hope,
you will allow for any shortcomings
which you may detect in the
foregoing remarks) that being not
a busy practicenes, I have not
the time I should like to devote
to an elaborate research such
as you well from time to time.
precise as these. Yet you will see that I have had and am still having abundant opportunities for making observations yet not time for describing them. However, in this Thesis I hope, I have succeeded in describing to you the Clinical points that I made with regard to the treatment of hysterics by hypnosis and suggestion.