On Hypochondriasis.

By

Christopher Neighton.
On Hypochondriasis.

The term Hypochondriasis has been employed from a very early period— to signify a depressed state of the mind— although this name conveys no specific ideas of the nature of the disease in as much as a certain amount of mental depression accompanies many other diseases. Thus in certain febrile affections there is a dyspnoea of feeling— all kinds of influenzas, the lives acute and chronic— and more particularly we find the term applied to chronic lung diseases. In few cases, I think, account for the origin of the term, applied, however, as is the case with more than ordinary vagueness.

But perhaps it has this advantage over any other that might be substituted, that it conveys to the minds of Medical Men the idea of a certain series of phenomena— although as we shall have occasion to notice, the idea attached to the name is almost as varied as the phenomena themselves.

However I doubt not that as our knowledge of Pathology advances the Mortal feelings and pains usually described by patients of this class will be more easily accounted for. If we investigate the nature of the disease
With more accuracy, than has hitherto been the case, and although much difficulty attends this — yet we anticipate a hope, that what we have mentioned concerning this subject, will give a more precise and definite idea of the Pathology of this obscure disease.

On perusing various medical authors on this disease, one finds that generally one agrees with another — that hypochondriasis really is? — Their Bolton defines it to be “indigention with languor, sadness and fear from inadequate causes in a melancholic temperament.” — Sydenham on the other hand regards hypochondriasis and hypochondria as one and the same disease. He says, “The affection which I have characterized in females as Hysteria, and in males as Hypochondriasis, arises (in my mind) from a disorder (irregular) of the internal spirits – this precipitates them on different parts of the system; so that seeing down violently and multitudinously around particular organs, these excited and pain wherever the causations are equivocally acute, answering and prompting the sanctions both of the pains they leave and of the pains they fall on — as examples of the irregularity of their distribution is objected to nature, and the economy takes them from danger.”

As a clinical view was held by Jansaged, Pinel, Mason, and others.

* Sydenham's works, Spirit: Disquisitions, 1779, 1785.
And in more recent times has received the refutation of Mr. Cogges, who states that Hypochondriasis "is in all cases a symptom of affection of the brain". - M. Dujardine considers it as a disease arising in the stomach and intestine in the form of passive activity, in a "central adaptation of similar ideas, in the stomachic, or chronic, consequence of the cerebral chronicity". - Hoffman terms it spasm of the stomach and intestine, arising from a disturbed and increased peripherical action by sympathetic shadowing the whole nervous system into convulsion and devanging all the functions of the animal economy.

M. Dillanmay in his treatise on nervous diseases agrees in this opinion, and expresses himself more distinctly on this head: "Il est pas dans l'alteration du tissu nerveux lui-même, qu'abride la cause immédiate de cette maladie, c'est-à-dire une affection des propriétés vitales des nerfs de la gastroconstitutive, aussi l'on reconnaît généralement pour lieu primitif de l'hypochondre les vicissitudes abdominales, spécialement lechtome, affecte dans leur sensibilité organique."

* Mr. Cogges on Hypochondria, 1810.

↑ Dujardine, Pathol. Intime et Local.

↑ Hoffman, 1811, ibid.

↑ M. Dillanmay, Neuromatous Diseases.
Mended on the other hand regards it, as depending on a morbid condition of the ganglionic nerves.

In reviewing the opinions held by the various medical authors which we have spoken of - we are forcibly struck with the sound of unity held by those writers on this subject, and we by no means consider that they should so differ being that patients coming under their advice with such a catalogue of symptoms - (as we shall have occasion to state) and how Robert Willan, Maurice, &c. would refer the disease as of abdominal origin; or how Mr. George, should class it as a primary affection of the brain, and the argument it has adduced seems to have considerable weight. - But when we reflect on the mental indications of hypochondriasis, this rise of morbid feelings, of painful sensations, which intrude, we can the more readily admit that a deviation from the natural and healthy state of the central functions has a close connection with these diseases - I think, if we view this disease as depending on a morbid condition of the blood, and through the influence of the blood, acting on the brain and the nervous centres - as that of bowel paralysis. - It will I think, go further to explain the real nature of the disease suggested above the nature of the symptoms, &c.
Phenomena, than any of the specious advances by various writers on this subject. We have many avenues arising and descending on an alteration and arrangement of the fluid in a different type to that we are now considering. We have many instances of arrangement of this fluid, in which matter is formed by the metamorphosis of the tissues during the performance of vital functions, or produced during digestion and nutrition and which are distinct from any elimination, which may become increased from various causes, and if retained in the system give rise to various morbid symptoms. This we find to be the case with regard to carbon, wine, acid, sugar, etc. Their proportion may become much increased, and when such takes place as morbid condition of the fluid nature. This excess and wine acid should be detected by the kidneys as soon as formed. However, the function of those organs being arranged, and as a consequence, one or more of these substances are retained in the blood, and when such follows the blood, enzymes other changes. We know that the presence of an excess of wine in the blood, causes the functions of the brain and functions of the general system, and whether this state be induced by the climate.
of the blood; or by the state of the mind, each equally interferes with the proper performance of the nervous system.

This arrangement in the state of the blood may only amount to what we call hypochondriasis; or it may proceed to coma and death.

But before entering into details it will be necessary to consider the causes and symptoms of hypochondriasis and then consider the nature of the disease under two pathological heads.

**Causes**

There is no disease whose development is best foreshadowed by certain conditions, existing in various ways and with different degrees of intensity. Therefore it is only necessary that I should mention the various conditions which predispose and cause hypochondriasis.

The predisposing causes seem to depend in some measure on the general constitution of the individual, as from age, sex, and probably occupation—our inquiry into the habits and circumstances of the life of the hypochondriac previously to the attack of the disease will often tend to remove much of the obscurity in which it hides, and causes are ascertained. In this way we shall generally learn from the patient's previous history.
That he has been subject to the mortist influence of disease
-- hence adverse to health which will always tend to
the disturbance of some of those various vital processes
by the true performance of which the preservation of
the health as well as of the mind, as of the body,
can be fairly measured, depends

The middle period of life, or the interval between
the twenty-fifth and fifty-fifth years, is the age which is
primarily exposed to this disease -- it seldom affects
persons before the twenty-fifth, or those advanced beyond
the fifty-fifth year. Now Dr. Copleand's "hypochondriasis"
affords in early life incessant general indulgence par
icularly masturbation should be dreaded as having
been the chief cause." -- men in general seem to be
more liable to this disease than women. Yet it,
does occasionally occur in the latter class.

There appears to be two distinct and separate
causes -- one of a moral nature -- the other physical.
The moral causes act injuriously on the body through
The agency of the mind — the physical acts more
directly as punishment to the performance of the
functions by which healthy blood is preserved, and
affords matters removed from the agonal

* Copleand's Medical Dictionary Art. Hypochondriasis
The primary issues of both melancholical condition of the
body and the mind, as a consequence, are this disease
of the body is the affection of the mind.

Among the physical causes we may class debilitating
employment, intemperate habits. Dr. Gregory remarks
on the table, that this disease has come to become
connected with the county diathesis—often arises in
those who by too idle or full living have overcharged
the vascular system. It is a frequent occurrence to
person addicted to the use of spirits in liquor—
I have met with it in great severity in wine
merchants and publicans—persons accustomed to
active occupations, mental or bodily, or to much
exercise in the open air—those returning from
business have found their relief of enjoyment
married by the vicissitudes of dyspepsia, more
especially if they live fully and in a state
of comparative indolence. Dr. Pridie states
that he has known it to occur among agricultural
labours—especially in those whose occupations
are solitary. I have known one or two instances
occurring in this class of persons.

* Dr. Gregory's Practice of Medicine 1743.

1 Dr. Pridie, the Practice of Medicine 1743.
The Moral Causes of Hysterochromatia include all emotions of a painful character — such as long continued anxiety, care, grief, disappointment, from whatever cause. Studies and professions which require intense and constant application of the mental faculties — anxiety respecting schemes and prospects of worldly advancement, and the disappointments that follow when these prove unsuccess-ful — the indulgence in vicious habits to which produce evils alike felt to the mind as well as body —

Symptoms

The most striking and peculiari characteristics of Hysterochromatia are the corresponding state of mind — boredom of spirit, and the great anxiety manifested by patients on this subject of every bodily ailment, however slight it may be —

In their general appearance, they have an unhealthy look; the countenance presents a dull, haggard hue — (as the dull gallows colour from Birkenshaw) as we are accustomed to observe in those Europeans who have resided for some time in warm climates). The individuals who
Labour under this Malady may occasionally present no external indication of disease - even the person may have all the appearance of good health - but the sufferer is rare. At this time, their skin has a peculiar dark and dingy hue. In most cases there is not much Lassitude. Often this sometimes occurs. The muscular development does not indicate much weakness, either there is a just complaint made by the patient in regard to loss of muscular power. They often tell us that they are unable to walk; or if they do, to feel quite fatigued with the slightest muscular exertion.

They complain frequently of disturbance of the Stomach and Hypochondrium, pains and uninterpretable sensations which are chiefly referred to the left Hypochondrium, especially after eating those. These sensations are much increased with a sense of weight and oppression - sometimes this amount to true genuine pains which return at very short intervals after meals accompanied with prostration, Cardialgia or a sense of burning heat at the extremity of the Hipbones. The tongue is in most cases clean or only
 Covered with a slight brown coat — the pulse is fe.
The most part slow and languid. And the action of
the heart diminished, indicating that blood is
propelled with dulness and want of energy.
Sometimes the respiratory movements are
executed with as much freedom as in health.
Ordinarily however the respiratory functions are
performed more slowly than in health.

The eyes are usually dull and without luster,
in some degree sunk in the orbit. Large and
tortuous vessels are often seen in the conjunctiva,
bearing a sluggish and retarded circulation.
— on looking at any object for a short
time the eyes grow dim — they usually experience
a sense of confusion with pains in the forehead
and temples, sometimes in occiput with a
feeling of dulness and listlessness accompanied
usually with a disturbing headache, and
intolerance of light, which renders the patient
confined for any mental exertion.

They often experience faintness and sensations
of lassitude as if dying — wandering pains of
a neuvevic character are very frequently felt
along the course of the principal nerves.
Sometimes accompanied with a feeling of numbness described as occurring in the leg, arm or fingers. Distress is often one of the most distressing symptoms complained of by the hypochondriac. They generally lie tossing about all night or until towards morning when they may chance to fall into a disturbed and unrefreshing sleep to awaken again as miserable and distressed as before. This distress is so much dreaded that the hour of rest is equally shunned, but the rest they are in retaining the more unshakable and watched over they while on bed. And the fatigue and languor of the following day is proportionally increased—

The secretion usually indicates a stenosed and disturbed condition. The skin is generally dry and harsh to the feeling. The breathing becomes irritable in for the most part of an unhealthy and unnatural quality accompanied with fetid odour.

The bowels are often disturbed, obstinately to constipation. This state may persist occasionally to diarrhoea, but sometimes confined or relaxed alternately—
The evacuations are in most cases unnatural - arising sometimes from contaminated state of the bile, and hence often covered with a large quantity of mucus - at other times after the evacuations may have been unhealthy they may have become natural by showing a return of the functions of the liver and other-acting organs sufficient to prevent any increase of the malady but not sufficient to give the system from the morbid matter influencing the disease.

The urine being the most important item and which most frequently indicates the first deviation from health to disease - will seldom be found to be in its normal condition - either in quality or quantity - this change has been long observed by the slow physicians - Lyelemann made some observations on this point - he remarks that in males even a few times after passing waters of the true urine coloured one a sudden and violent mental motion may produce the discharge of an abundant flow of urine not of a straw colour but of opalescent carriage - as long as the urine is of this colourless character the fit is on
The patient and he suffers accordingly.

I cannot say that I have observed this symptom in the character described by Lyall—in the majority of cases it is more conspicuous in health and of more specific gravity. The urine itself is in the morning generally of a lighter colour and of a dark colour acid and when allowed to stand acquires a opaque appearance. In some of these cases I have observed the well defined balsamic crystal of urate of ammonia (or this point I shall have occasion to speak hereafter).

The appetite is in most cases ordinarily improved, and the stomachs are secured where the contrary was the case. Besides these physical signs we have just enumerated, the mind labours under a degree of morbid excitement in hypochondriacal feeling. But this is very distinguishable from all the modifications of insanity—the morbid feelings of the hypochondriac are real and self and the physical disturbance of the hypochondriac he apprehends to be much greater than they are, and this apprehension leads him to dwell upon them, and make them the subject of—

* Sydenham's works vol. 1th.
Conversation whenever he has an opportunity of doing so, from the arrangement of their psychic system and more particularly the nerves of sensation, under these conditions are morbidly susceptible to a very high degree. As that light, sound, noise, are intolerable. Hence this morbid condition of mind is constantly placing these troublesome sensations and feelings in different parts of their bodies to the account of some more serious organic disease, once this thing goes on constantly describing their complaints in great detail and accuracy, while however it much magnifies their fears, and often false conclusions concerning it as real malady. The concentration of their whole thoughts and attention being directed to one object, and that their own malady. Feeling also as is too often the case that they derive little benefit from medical aid, and being moreover made the object of satire by popular writers, as well as the taunt of their sympatizing vehicle their case worse.

* Dr. Poelchau and Dr. Hypochondriac.

I write Dr. Poelchau on Dr. Hypochondriac. The Memoirs of Dr. Hyperasthenic by Charles Ramsay: William Smee of Dr. Poelchau.
inevitably merit all tend to aggravate their symptoms, which increase their misery and discontent to such a point that instead of real sympathy and compulsion they met with the death of compassion.

It is then less to be wondered that they fly from one Physician to another, until perhaps they find themselves in the clutches of the Quack who leaves them still more subject and wretched than they were before—Can it be wondered at, that they are timid and sick to the spirit, how tormented and tortured into wretched feelings of despair, and their life a burden to them—That they should look upon death as the only form of relief from their miseries.

Well might each day to himself what Confineto hell be endured. "Could I be translated to paradise unless I could leave my body behind me my melancholy would cleave to me there."

**Pathology**

"Anatomical researches" says Dr. Parke to some known no light on the Pathology of Hypochondriasis nor does it appear at all distinct.
That the subject will now be elucidated by means of organic changes of almost every description have been discovered in the bodies of persons who have been the subject of this malady. This diversity is too great to allow of the supposition that they are all connected with the complaint. The individuals in whose bodies they have been discovered have terminated their existence under various diseases. Hence the diversity of morbid phenomena, which if it were possible to trace the connection of causes and effect would probably be found to have stood in no near relation to pathological ailments which affected the individuals in question without endangering life or ultimately affecting its termination.*

From what has been stated, it is evident that little information can be obtained as to the nature and seat of this malady from morbid anatomical investigations. Our inquiries must from necessity be directed to the morbid condition of the system during life. And considering what advances have been made into the nature of many illnesses observed therapeutically by the aid of chemical and

* Cyclopaedia of Medicine Vol II p 353
Microscopical investigation of secretion and excretion of the body. It naturally looks to such means, when information cannot be obtained from any other source—viewing this malady as one depending on a morbid condition of the blood—and more especially the importance of this fluid—the various vital and chemical changes which it constantly undergoes during life—in reflection we do not wonder that disease may arise from alterations of the blood—when we consider the numerous circumstances by which it may be altered—atmospheric vicissitudes—climate, drinks, and the various conditions of the nervous system by which all the secretions are governed—all have a powerful influence on the blood and may give rise to numerous arrangements in the system—in this account, both on this fluid as "materiæ origine,"—

It is now fully established that if the retention of any substance in the body, that is actually rejected, has a very prejudicial influence on the system—then this requires careful observation in rightly estimating its effects and appreciating its reality.

For if any secretion or excretion be imperfectly performed
sincerely almost, we have a compensating action or effect on the body. This is an increased action in the parts.

The effect is still greater activity of nerves and muscles, and this usually takes place in some part with which the abnormal condition has a concurrent function— as from the brain to kidney, lungs, and

But if we suppose that there is no compensating action at all— What is the result? For it is of little consequence whether the influence be as coarse and tangible as a bullet; or as mysterious and refined, as in the passions— so far as they are equally injurious influences acting on our physical organization the mode of dealing with them is the same, for they alike produce gradual and more or less continued disturbance exactly according to the state of the body and the intensity of their action.

If we take, for instance, anger or grief, just as we live them applied with greater or less intensity in different conditions of the system, we observe every class of results in kind, that the more intense effects in certain persons are excitement and reaction—
It is true that certain intemperance of passions overruns these relations, as anger, fear, etc., in fact, these will equally stop the heart's action. And the actual forms of anger will much more frequently ensue in the heart and lungs—fear the head and kidneys. The latter in fevers sometimes occurs in hypochondrias—is one of the symptoms frequently complained of in palpitation, and some believe that the quantity of wine is also increased.

If the passions act in a more habitual and inveterate form they appear to produce effect having a close analogy to the action of alcohol—the pathology of alcoholic intoxication according to Dr. Camper and Dr. Macfrecanl, of the poisons have been fully made out by experiments and observations, thus when alcoholic liquors are introduced into the stomach should undergo rapid absorption into the circulatory system is precisely what might be anticipated from our knowledge of the conditions under which that absorption takes place; and there is ample evidence that such is the case. Thus Dr. C. D. By was always able to detect the alcohol in the blood of the animals, which he had poisoned by injecting alcohol into the stomach, provided they did not live too long afterwards; and
M. Monnand and Samaras have more recently determined the presence of alcohol in blood of fasting persons. The rapidity with which the absorption takes place may be judged by the fact, that in one of Dr. Percy's experiments, in which the animal fell lifeless to the ground immediately that the injection of the alcohol into the stomach was completed (the respiratory movements and pulsation of the heart entirely ceasing within two minutes), the stomach was found nearly void, whilst the blood was thoroughly impregnated with alcohol. Hence it may be reasonably inferred that in all ordinary cases of intoxication, and in a great number of cases of death from the introduction of alcohol into the stomach the effects are produced by the passage of the alcohol into the current of the circulation so as to exert a direct action on the nervous centres, and this influence is confirmed by the fact that Dr. Percy has demonstrated its presence in considerable amount in the instance of the brain.

Now we are aware that there exist certain mortal conditions of the blood, the causes of which & Carpenter's Prize Essay on alcoholic delirium p. 1718.
May be transparent — yet the effects are as palpable on the nervous system as that we find to take place with alcohol — Many of these are applied, particularly as not to produce excitement as these place with alcohol, but just that sensibly increase of action on organs which leads to a gradual and gradual condition of those organs and thus a deviation of the healthy condition take place — There is then an actual poisoning, as well as imperfect nutrition of organs — then nourished by not only a poor but poisoned blood, which in the result of the lack of proper elimination from the body — the blood being changed this state interferes with perfect assimilation, and blood nourished, which is now the result of the poisonous fluid, is carried to the brain which becomes as a consequence ill-nourished — Now when we consider the causes that give rise to Hypochondriasis as exemplified in interferences, how the various morbid symptoms can arise from derangement of the brain and other nervous centres — As we have already shown that the mind, as in fear and grief exercises a direct influence over all the body functions — It is easy to see that the distressing passion must to a very considerable extent influence in
This way — all the emotions are under the influence of the cardinal feelings to a remarkable degree —

for instance intense sorrow suspends the action of the liver — sudden fright stimulates the action of the kidneys to an unlooked degree — anger arrests the action of the liver — even tears do not flow when grief is violent — we find then that a certain amount of nervous stimulus is necessary for the performance, that changes in the quality and amount of this stimulus are capable of modifying their actions. Therefore whatever causes impairs, or diminishes this nervous influence must necessarily diminish, arrange or arrest these important functions and as a consequence arrangement of the system.

We are all connected with the almost overwheming influence which mental functions of any applicable character have upon health in assuming abnormally the vital actions — we also know the pernicious effects which mental depression gives rise to in depriving the body of that stimulus necessary to the harmony of the system.

This point out, how close the relationship that exists between the vascular and nervous system, and how impossible it is to affect
the one, without more or less injuring the other—
Is it not to be wondered, then, that slight effects producing
also, but not less certainly, should interfere with
vital and chemical forces; as well as the transfer of
or from a deficiency of these forces one unable to elimin-
ate from the body—If we take Bright's disease
of the kidney, the blood in that disease is deprived
to a considerable extent of its oxygen—our portion
escapes into the cavities and sinuses of the body, while
the other is removed by the kidney—The presence of
of albumen in the urine indicates a disturbance
of the circulating fluid—By Long & Jones that the
kidneys are not to form urine, but to separate from
the blood substances that are useless or harmful to
TheDigestion—Anyorganthatisusedmustbedeprived
andthesubstancesthatithasbeenusedmustbedelivered.
IntheMuscleforexample:TheMusclecontainsofthese
basicnon-nitrogenousfatandavarietycomplexarrange
ments of Carbon, Hydrogen, Nitrogen, Oxygen, Carbon
Phosphorus, Carbonic Acid, Enzymes & Phosphates,none
are thelastproducts of Muscularaction, but of the action
of oxygen on the Muscle—the intervening products,
probably, are innumerable: Breathing, Kreathing, Acid
breathing, and Breathing. Acid—some of the products
are burned out of the body by the lungs, others by
the Kidneys. If the removal of some of these products
by the lungs is stopped, the circulation through
the body ceases in two minutes; the functions of the
heart and brain are arrested, and from the medullary
spinalsteppage in the lungs death ensues. If
their removal by the Kidneys is stopped in two days
the patient is poisoned: The nerves and Muscles
are affected by the Poisons and Chemical Action
burning. This is the result of the absorption of substances
in the body, which ought to have been excreted by the
lung, Kidney, etc. We know that there may be various
degrees of intensity of such effects, varying from
F. B. Jones are the relations of these to the Food. F. B. Jones London, 1850.
Waves of the blood - Besides these occurs under certain conditions of the lymphs a secretion from certain organs - thus the secretion of lymphatic poison to the skin and peritoneum - of the poison of drank from to the tongue and lymphatic glands - of Memers to the lungs - of cholera to the prehens-rectal mucous membrane - and all particular parts of the body in cold and other malady - when the blood is largely changed into the poison - it is no degree militates against the moral view of the pathology of cold the morbidity adjoins the great toe as a favourable locality - or against Rheumatism - that the morbidity poison is prone to attack the head -

There are fundamental facts in pathology and one of great importance in pointing out, how certain organs of the body become affected by the presence of certain morbidity poisons - the results of which are as obvious, as that of other poisons. A certain organ of them may exist in such minute quantities, as not to be detected by the most careful analyses - and will notwithstanding localize in particular organs or even in particular spots of the same organ. It will affect appears not imperceptible, and in accordance with the pathological cause - we have mentioned - if it were
Infected matters as depending upon the presence of certain morbid substances existing in the blood, acting on the brain and other nervous centers, and through them, giving rise to phenomena of synphones as here considered. Omitting as it is to state this disease depends on the presence of certain morbid substances existing in the blood, producing in source of irritation on the nervous centers and that in the central axis is a diffusion of this irritation takes place through the gray or white matter, so that it involves other nerve fibers, and as a consequence this impression is diffused to distant parts—producing contractions far beyond the part in which the primary impression was produced. We know that mental influences may be conducted from the brain through a succession of nervous centers—the spinal chord and ganglia—to one or more ganglia of the sympathetic to produce the influence of the mind on the organic functions—not act as with the presence of morbid substances acting on nervous centers. We know also the function of the pneumogastric nerve, more particularly of its ophthalmic and palatine branches, how mental influences act on these nerves through the central axis.
We know too how quickly poisons taken into the circulation react on them — Considering Hypochondriasis in this light, will explain in some degree, the pain and precipitation of the heart, and also how the blood vessels may become to a certain extent improved, in its function by the presence of mortified substances or disintegration in the blood — As it is that portions of the nervous system through which spleen, kidneys and erectile functions are supplied with nervous influence — Their disturbance of these takes place, many feelings and painful sensations may be produced from this arrangement of functions, and account in some measure for many of the colic's before pains, which are referred to this region of the body — This view of Hypochondriasis will not appear to improbable when we consider, that in cough, which depends on mortified substances existing in the blood — that disorders circulation of the blood gives rise to the affection termed "fourth in the stomach" —

What this mortified substance is I am not prepared to say? But from the information obtained by the examination of the urine, much valuable and important information has been gained by the
The presence of salicylate of lime in the wine, and the symptoms which the presence of this salt when in excess, are very much allied to the disease under our consideration. Dr. Jones in the 1st edition of his book on coromant deposit, pointed out the frequency of salicylate of lime in the wine. Many doubted his statement; or if they did not, they considered its presence as of no importance—Dr. Jones says, "Salicylate of lime is so frequently found in the wine of those who are in good health, that I do not consider it as indicating any disease, but only a disorder of no serious importance." If the addition only indicates a more serious arrangement of the general health than that of others, it is.

Dr. Lee, in treating of this subject, is more definite than Dr. Jones. Thus he says, "When the salicylic distillation is thoroughly established, it depends on some that seem almost above and to have a close connection with the subjective sensations. And perhaps considering the deceased state in which salicylate is found in the wine, it would be proper to separate them into two classes, one in which salicylate is"

* Dr. H. B. Jones: Lancet, July 1839.
Occasionally found; in the wine where salic acid is a constant constituent in the wine, and in a great measure replaces this bitter body in which the relative amount of wine is greater than in health. This state of condition a series of symptoms are generally present, usually of a nervous character, great depression of spirits, insensitivity of attention, or extreme depression after slight excitation, dull heavy pains in bones - dyspeptic symptoms.

Dr. Mind in his new edition on urinary disease agrees in the statement of Dr. Caudle - he adds: "It is impossible to connect any definite set of symptoms with all cases in which salicylate of lime appears in the wine, indeed persons will often go about their ordinary duties in apparently fair health for a long time and yet be constantly expecting salicylate of lime - the consequence of this some persons have actually affirmed that it has no relation with any pathological state of the system, and a appearance in the wine of no consequence - this opinion can be drawn from very limited experience alone; indeed
I am not sure that Rhombo's valuable as his opinion as a Chemist has any claim to our confidence, as a Physician; and he is chiefly referred to as advocating the erroneous views I have alluded to. This kind of reasoning he admitted the existence of albumen, or blood, might be regarded as of no importance, because we often find patients afflicted with this very condition, and yet one is free from apparent indispositions. But we are unable to persuade them to take care of their health until the disease indicated by the disease of the cause in question has proceeded to an incurable condition. I cannot refrain from making a further extract from this valuable work. More particularly, ow the symptoms which those labouring under this diseasie presents the more especially from the close analogy and approximation they have with many of the symptoms of phthisic asthitis.

Thus he states that persons afflicted with this form of disease referable to this class are generally remarkably depressed in spirits, and their melancholy aspect has often enabled me to suspect this.
Presence of oxalic acid in the urine—sometimes a peculiar luminous greenish hue of the urine has been observed, but more especially the face has a dark and ugly aspect common in some forms of dyspepsia in which the junctions of the bowels are arranged—

They are generally much emaciated, coughing in slight cases, which is extremely nervous and painfully susceptible to external impressions of fear by which it is tried to an extreme degree— and in many cases labour under the impression that they are about to fall victims to consumption—

They complain bitterly of inactivity, of feeling themselves, the slightest exertion brings on fatigue— in temper they are irritable and irritable: in men the sexual force is generally deficient and often absent; an effect probably of exhaustion produced by the excessive exertion of the bowels, so common in this affection— A severe and constant pain across the loins is generally a prominent symptom, with often some amount of irritability of the bladder— The mental faculties are generally, but slightly affected, loss of memory being sometimes more or less present— Well-marked dyspeptic feelings are always complained of.
Indeed in most of the cases in which I have been count
able I have been told the patient was ailing, taking
fleek health and spirits clearly, or remaining persistently
ill and weak without any definite or demonstrable
cause.

The predisposing causes which induce this decline of
the system are also in close approximation with that
which gives rise to Hypochromicemia—But the fact
naturally suggests itself to us, is Malaria and
this disease was and the cause—I think in the
general data of our knowledge of both diseases
it would be a true from alone to come to the
conclusion that they were—As the pathologic
conditions of the system which induce their occur
and join what we have called of the existence of
Melic Acid indicating a disarrangement in the
system—As far corroborates the views we have
advanced in regard to hypemicemia—As
it clearly points out a disarrangement existing in
the blood—This same holds true in hypochromia—a
form which we have placed under the Head 
The following generalization of the pathology
of this disease—

X. J. F. Reind University adjoint.
I. As hypochondriasis is a disease occurring for the most part at the adult period, when the brain is peculiarly liable to suffer from mental shocks; or other causes of disturbance of the system and more particularly the blood becoming adhered and generating some morbid substances, which act as irritative agents.

II. That the nature of the cerebral affection is due to weakened nutrition accompanied with irritations arising from the existence of certain morbid matters in the blood, acting on the brain causing it to generate forces more feebly and irregularly then in health.

That the sympathetic system, as the other places, become disturbed in their functions by the presence of these morbid matters of the blood, and as a consequence give rise to various troubles and uneasy sensations.

**Diagnosis**

As we have already stated that hypochondriasis has been regarded by some as an illness closely allied to some forms of entirely different type. On this account it is of importance to be able...
to distinguish it from others, to which it is more or less liable to be confounded with—

I. From Hysteria—by languor, fear of death, bewilderment of the whole mind, our self. And hysterical symptoms are more or less present in Hysteria. Hysteria seldom attains its aggravation a form as it generally more amenable to treatment—

II. From Melancholy—Hysteria is generally seen in persons close to a resemblance to several varieties of serious Melancholy, as to be often distinguished from the former with very great difficulty. The more so as it is not an uncommon thing for Hysteria to terminate in Melancholy, or for Melancholy to be combined with Hysteria. —There is however this distinction between these two diseases. The Melancholy seen in those whose health is much deranged seldom arises except from mental causes, such as grief and miseries, joined to the corporeal ones—Melancholy may be said to be always attended by mental causes—Airing from the various forms of grief, despair, and despair, where everything is viewed through the medium of gloom and despair. Minor Hysteria is much more affected by despair and dejected ones in a very different state of mind from persons
Suffering under Melancholy — The Mental Feelings And Complain, arise generally from corporeal causes and the mental phenomenon consist of morose ideas accompanied by the patient about their bodily health. In other subjects they think and converse rationally, occasion ally with cheerfulness; their feelings and affections are not in that personed and muddled condition (except in extreme cases) which is one of the most characteristics symptoms of melancholy.

V. From Chronic gastro-enteric inflammation. — In this disease it will often be difficult to draw a line of demarcation. There is generally little pain felt on pressure in hypochondriasis and that they bear strong and continued pressure better than slight and momentary. Whereas in constantly causes some pain where there is much abdominal inflammation. In hypochondriasis the bowels are generally constipated; the gastro-enteric affections they are usually loose and irritable. The absence of fibril symptoms, the capability of being exercised with considerable degree of muscular strength, appetite not as much impaired — will alone be sufficient for us to recognize the disease from the other.

IV. From Hysterics. Says St. Remi, that hypochondriasis...
is characterized by a false direction of the moral energy and is generally associated with inactivity, a concentration upon self and a disposition to have recourse to a great variety of medical nostrums. Hysteria is accompanied with feverish irascibility, fitful activity, and often with lively interest in the welfare of others and with confidence in the usual medical attendant. The former disease is marked byullen countenance, heavy ideas and depressed spirits; the latter by a reckless and madly expression. Consultation for years and sickle temple. We must however remember that the two diseases are not incompatible and often hysterical hypochondriacism and occasionally occur.

**Prognosis**

When the case is one of purely hypochondriasis, we need entertain no fear as to any immediate danger to life — in advanced cases there is danger, however, of a merging into fixed melancholy and of being complicated with serious organic disease. The patient's feelings too, reaching on the body produce general arrangement of the bodily functions.
Treatment.

In the preceding pages, we have endeavored to show how injuriously the circulations of unhealthy blood operates both on the body and mind and the necessity that exists for removing from the lymphatic matters which give rise to the disease we have been considering—

It now remains to consider the treatment. This must rest on a basis which will be best suited to restore the lymphatics to a normal condition.

The plan of treatment will be considered under the following heads: I. Moral, II. Medical, III. Hygienic.

I. Moral treatment must be made to act in every way on the mind of the hypochondriac by all numbers, indirect and external means whilst we may call into operation—so that by a kind of education, we may uplift and correct those aberrations and defects previously observed in the thoughts, feelings, and affections of the patient.

It will be necessary to attend principally to the catalogue of symptoms which they describe, and endeavor by tact and kindness to gain their esteem and confidence—whenever we may be enabled to make the most of our resources to overcome.
the fragrance and operations frequently offered by
them of our assistance — when this help is joined
they will submit more readily and cheerfully to
whatever be may regime of them.

As many of the causes which induce this malady
are of a moral nature, our first duty will be to
certain their previous history, and endeavors as far
as possible to know the exact origin of the disease —
and removing there as far as may be practicable by
the patient, laying aside their former habits and
reversing the moral influences which induced the disease.

A suspension and removal from our ordinary duties
for a time — by change of residence and traveling —
the benefits to be derived from change of scene and
traveling in such diseases, few will call in question.
As the mind, abstracted from the cares anxious and
propensities of business to (more especially in a
country, such as ours, where fluctuations of various kinds
and reverses often arising from those are among the
causes which induce this malady) the advantage
then of traveling where a constant succession of new
and interesting objects are constantly preventing them
relax to the eye and those diverting the attention
leave little time for reflection on the past; or gloomy.
Anticipating on the future - No such thing is a pleasing influence, created in the minds of those so occupied, and a greater change of decency than has previously observed.

The functions of the body born participate in voluntary benefit derived from the sublimation of the mind, and in proportion will the abnormal susceptibilities of this patient outside.

In many cases of recent origin such a mode of treatment will alone prove sufficient, but in those of long standing they acquire their means to destroy the functions of the body and mind to their normal condition - We will consider real, what advantages may be expected from:

Medical treatment and our attention should chiefly be

restricted to the choice of the decisions and reactions and
the remedies we may have recourse to such as will
stimulate them to increased activity. Approved relax
ions may be removed by the use of medicines such
their reproductions is what he must study and respect.

As constipation is one of the most common symptoms
it will be necessary to correct this condition of the
alimentary canal by the use of such aperients as
are best adapted for inculcating the bowels of
their contents, and at the same time least depressig
to the general symptoms. The saline epirietants have been
depended for this purpose—but it may be necessary to
premature the use of these with doses of the bitter fum
father, as Compound Balsam. Till or Compound Tussel
ion of Aloes, with alternate doses of rhubarb—As their
cause a more copious perspiration from the coated surfaces
As well as stimulating the lungs to increased action.
As it must not be overlooked that the frequent
use of epirietants create a strong desire for them
Continue—It will be necessary to use them means
not to be continued to avoid as far as possible their
Constant use.

As want of sleep is one of the most distressing symptoms
it may be advisable to use for as few nights, along with
the other remedies, small doses of Dover's powder to defray
the insomnivities and to stimulate the skin to increased
action. The use of tonics may in some cases also be
of service.

III. Hygienic Treatment:

A. Diet.
B. Bathing.
C. Air and Exercise.
D. Clothing.

A. Diet. In considering what the patient should use for
You good - Whether they should be exclusively the animal or vegetable aid - I conclude that a mixed diet, the one best adapted, and humbly that he may receive a sufficient amount of nourishment, and not over-stimulating in its nature - to obtain by the formation of healthy blood, that both the quality and quantity be such as may be adapted to the constitution of the patient. But before we can expect to derive much benefit; or look for any permanent improvement, the digestive organs must be restored to their normal condition, as they are in most cases more or less deranged as a secondary cause.

This will be obtained in some measure by the means which inspire digestion - by which digestion is created and the blood, at the same time ferried: that healthy action of the stomach will be restored as functions of assimilation promoted.

By nothing. The chin is an extensive secretion and secreting surface and the importance of the action as well as the sympathy which exists between the external surface of the body and the internal organs.

The tepid bath will prove a most valuable auxiliary in the commencement of our treatment. By restoring the functions of the cutaneous vessels, so as to stimulate them to expel from the blood intumescences, otherwise debilitating.
and also present this undue accumulation of the blood in the internal organs—this will afford materially in establishing and maintaining the healing currents. After the use of this for a short period the substitution of the thorough bath and friction over the surface of the whole body with cold water will be beneficial.

C. Air and Exercise. While the diet is regulated in quality and quantity, and the other daily exercises are done, the air of the room will be absolutely necessary for at least two hours each day. The effects of this will be all the more salutary if no degree of perspiration be excited by it. By this increased action of the skin much deleterious matter is removed from the system. At the same time by the general increased action of the circulatory and respiratory systems the blood is exposed more frequently to the purifying influences of air. The blood in its passage through the lungs is freed from much combustible matter, and at the same time the effete materials are oxidized preparatory to their removal from the systems.

D. Clothing. The frequent change of the inner clothing is a most essential part of our
Treatment, as it, not only imparts a feeling of comfort to the patient—as well as prevents the injurious effects which would arise from the reabsorption of matters detached from the surface of the body—

A Good Thesis

W. G.

The author has omitted to show, in support of his view of the nature of the disease, that the urine always generally contains oxalate of lime.

W. G.
duchess
Ann Caryl to Carley
1790s
Radnor Post
1852