A sensible plan.

The writer will do for "The Service".
On

Simulation of Disease

and

Its means of Detection.

by Henry A. McDougall
A distinction of Disease is a practice more likely to fail under the influence of the Naval or Military Surgeon than of the Practitioner in civil life. It seems to be carried on to a greater extent in the Army than in the Navy. Hence this is to be accounted for by the different principles in which men are trained for the two services as well as by the fact of the men in the former branch of the service having more idle time on their hands 1st being in much under the eye of their officers the effect of which will be to lead them into idle dissipated habits to make them dissatisfied with the profession, as well as bring them into contact with bad companions who may lead them to perdition which otherwise would never have entered their heads. But this vice is likewise far less common now a days than during the early part of this century when men were forced into the service whether they liked it or not and were treated more like brutes than human beings.

But although as I have said the civil practitioner is not to blame in meets with instances of deception, still they are by the means to convince the wily either in his favorite practice have features pretend all
Letter to Dr. Henry Dublin Hospiat Reports Vol IV
sorts of admirers—remorse, from no particular motive, but from a species of hypochondriacism, or from the pleasure of having a deity find them when they can afford to pay for such amusement as perhaps from a taste of pleasure in amusing Shakespeare's bairn.

Again, he may be called as an act of charity to see some poor wretch who has suddenly fallen down in the midst of the street in what is supposed to be an epileptic fit. The fit however, as well as the brain, suddenly vanishing, or some disgraceful remedy being suggested on the arrival of the Justice, or, lastly, he may have to determine whether a patient who is taking advantage of some charitable institution as a hospital be not in reality a wilful and unprincipled impostor.

Diseases are simulated from various causes of different periods and intensity according to the end aimed at by the simulant.

Among the various causes for simulating may be mentioned, to obtain a discharge from service with or without a pension; to avoid going on foreign service; to avoid some disagreeable duty; a punishment; to get into hospital; to excite commotion and obtain alms. O'Cheyne thinks that soldiers are sometimes actuated by the same fancies as hypochondriacal patients in the middle stage of their illness, so that they take a sort of delight in snuggling amongst their medical officers, continuing to simulate one or a variety of diseases without shame, having any object in view but the one above mentioned. I should quote the following instance to show that it is often difficult...
Wilson on the Male Injuries General Repair Top 1895
to atone a reason for the conduct of a simulator. In this case which is narrated by Dr. Wilson the patient seems to have been actuated by a species of madness. A young lady of rank declared that the daily passed large quantities of gravel in her urine and to prove it produced half a pint bottle full which she asserted she had emptied the night before; it was ascertained however. If the common sand which is sold in stores, the lady however still continued to persist in her former statement.

The same author mentions another case where the intention seems to have been to have extorted money from the surgeon to conceal his ignorance. Had he performed an operation and should any evil consequences have resulted therefrom. The case was a man brought his son to the house of Dr. ? where Dr. Wilson was then residing declaring he had stone in the bladder and in consequence thereof producing pieces of a hard gritty substance which he declared the boy had passed by his intestines. On being told that they were not urinary concretions he got very angry and left the house saying that he would find some more benevolent surgeon who could not doubt the attention of a father. Who thought he would give his life to save that of his son. In a few days he brought the boy back with a large piece of stone sticking in his intestines, which was with difficulty removed owing to the great swelling it had occasioned. He was persuaded to leave the boy who after being treated well as after the
operation of following, confided that it had been done to excite
compunction. The substances alleged to have been mixed were
found to be pieces of coal.

Alleged disabilities may be classified under four heads:

First. Feigned diseases are those which do not exist at all but
are alleged to exist by the patient. The symptoms of which are imi-
tated by him. These may be termed fictitious diseases.

Second. Exaggerated diseases are those which do exist but are made out
by the patient as a great deal worse than they really are.

Third. Fictitious diseases are those which have been brought on by the
patient's own will and interference.

Fourth. Apparent or such as have begun with or without the
patient's interference but of which the cause is purposely avoided by him.

Under the first two heads I think most internal ailments
may be classed and external under the two last. But of course
there are internal diseases such as palpitation of the heart, which
may be fictitious and also external defects such as contraction
of limbs which may be fictitious.

Among the most common diseases feigned may be mentioned
pituitary and cima. The former because from the nature of the
complaint the patient does not require to be constantly on
his guard in order to escape detection as in many other com-
plaints but can arrange the time I place for the attacks accor-
ding as he thinks they are most likely to escape attention.
and the latter, because he can refer it to any part of the body he desires and state it to be better or worse according as it suits him without much chance of being detected unless by some

metaphors.

As diseases are signed for a variety of purposes, they are also chosen to as best suit the occasion. For instance, if a soldier breaks before punishment or to avoid some disagreeable duty, he will feign an acute disease, which shall last long enough to carry him past the dreaded period, after which he allows himself to be cured as speedily as possible. On the other hand, however his wish is to obtain a discharge, he will simulate a disease of a chronic incurable character which will render him totally unfit for service, such as paralysis, contraction of joints, loss of fingers, deafness, etc.

Diseases are very often signed by recruits who are raised in the country, when brought to the depot for examination. They very frequently exhibit either from some boisterous prank or from under the influence of strong drink, and when they come to theirRB

terms and have perhaps got, bruised about a little they repent of the help they have taken and would give anything like able to return home. They in consequence simulate various diseases and defects in order that they may be rejected as unfit for service. Selection is easier in the case of these recruits than amongst old soldiers as they are all obliged when they
Marshall's note on the examination of Recruits Cap 132.
enlist to swear before a magistrate that they are not subject to
fever and are in no way disabled by deformity, lameness, con-
traction of joints, or any other defects from acting as soldiers
should a recruit therefore appear at the depot with any of
these defects, and especially if he seems to depuit to the state
he has taken he may very properly be pronounced a Malingerer.
Malingering may be suspected in a regiment or a board that
if a number of men are suddenly seized with the same disease
or if a number should suddenly in an instance or the regiment or
while being ordered to a foreign station or if a disease break out
among a body of men where three bodies of men placed in the
same situation remain perfectly free from it. Mr. Marshall
mentions an instance of this in the case of the second battalion
of the Royal, in which corps whilst serving in the Ocean about
the year 1817 a great many cases of Chyporinia occurred whilst
the 25th Dragoon had not a single case although under canvas
in the same camp as the Royals; the disease was eventually
found to be excited although it could not be discovered exactly in what
manner it was brought on.

A Malingerer may be suspected when he affects an disease which
does not come on in the usual manner for persons according to
the ordinary course, when incompatible symptoms are present;
if the spine or an existing and by not any means of recovery
but yet shows a peculiar reaction to the medicines administered if the
Medicines are not followed by their usual effects and especially if in addition to these reasons, he is known to dislike any par-
ticular duty to the service in general.

Malingering is more common in some regiments than in
others, which may be owing to want of proper discipline
or inability on the part of the Medical Officer, as the free
speedily discover whether he can safely imposed upon a
man. Marshall mentions a case where the Medical Chief
of a regiment of Militia in Ireland disclosed upon a pledge
was executed with the discretion especially with the books
of soldiers. General of the Army discovering that he could be
lately informed when reported themselves affected with mem-
brane of spleen. The fraud was instantly detected by the
Deputy Inspector (Conway) who cured it by ordering the man
to attend to be examined to take morning coffee for the
purposes of cold leeching.

Writers on the subject of malingering seem to agree in saying
that a man but of slightest of malingering should never be removed
from a military to a general hospital as in many cases this
is the very thing aimed at and also because a man is more
likely to succeed in malingering when strangers than when
his own medical officer, unless that officer be ignorant of
his profession, whereas the medical Omen at the general
hospital may be a talented Omen or one accidentally idiots
In detecting Melancholy.

The facts are said to be more prone to influence than the doctors, or English and that class of truth generally considered to be most easily satisfied with their lot; namely, the poorest classes.

In the treatment of a suspected case of melancholy a medical man has two important questions to ask himself, namely:

First. What are the means most likely to detect the disorder?

Secondly. When detected, what means are most likely to succeed in making him give in and return to his duty.

I shall answer the last of these questions first. In many cases the difficulty does not consist so much in the medical man convincing himself that the case under consideration is one of mania as in making the patient himself own that he is melancholy or in afflicting him with intolerable proofs of the pretended malady.

When a medical officer is convinced in his own mind that a man is in the insane, he must not suddenly and rashly charge him with the delusion, or his mode of proceeding might intimidate a young soldier but would probably, if not certainly, have the opposite effect when an old one, perhaps one who had tried the same sort of thing success fully before, in making him more determined to hold out and accomplish himself, and if the opinion which he had formed should unhappily turn out the erroneous he is justified in the exercise of his commanding officer. Besides perhaps with the fate of the man who found himself through innocent circumstances
of this I should relate the following case. A man declared that he could not move his shoulder joint without great pain; as nothing could be seen externally during the space of six months during which time he was invalided, he was pronounced a malingerer and stopped accordingly. It was discovered afterwards, however, that a deep seated abscess had formed in the joint which became vast, ultimately, in complete ankylosis. These returns are as reprehensible as seven lords and in some cases would prove fatal, as a determined malingerer will bear a vast amount of pain and unreasoning without flinching as is exemplified in the case of Phærus, Adnus, a soldier in the 30th Militia, who was confined in jail for defecation. He lay from the 22nd of April to the 3rd of July 1811 in a state of insensibility resisting every remedy such as stimulants to the brain, the shock of electricity, &c. His eyes were closed and his countenance pale but his pulse healthy and respiration free. This was attributed to his suppurating contumacious and as I sat in the room I could sense no breath in the brain. At first it was thought that his illness might be the result of a fall and the question of brains was referred to the coroner in order to determine whether there was any destruction of bone present in the brain. The question was performed but he found no signs of pain or sensibility except uttering one word when the instrument for penetrating the head was applied. It was beneficially well followed and the case seemed hopeless till his discharge was obtained and he was taken to his settled house where he has been ever since sitting.
Maryland Hints in the Examination of Recants Page 191
at the door looking. His father and the day after he had been two
miles from home, cutting trees, carrying bales up a ladder and
assisting his father in mathearing a side.
Another reason in not attributing life of medical treatment is that the pain
which malnourishment inflict on themselves is often much greater than the
medical officer would feel himself authorized to inflict and it
should also be remembered that every time a malnourishment comes
off victorious from an examination, tends to make them more obstinately
grudged and also to cast a shade upon the character of the medical
officer.
As an instance of the pain which malnourishment will suffer in order
to accomplish their end, I may mention the case of a private in
the second battalion of the Royals of the King of England who
asserts that in consequence of an injury which he had received
on his shin, he was unable to stand erect. For a space of six
more than eighteen months he kept his body bent forwards to that
when his arms were allowed to hang down, his fingers reached
in width two to three inches of the ground. When laid on his back, his
torso rested nearly at a right angle with the rest of his body. And when they
were forced down, his body started up. His doctors, that were adopted
did not induce him to give in and return to his duty, but at last an
order was issued from the Army Board that all soldiers
whose first period of service had expired might be recalled and
that in doing this, they were to receive a bounty of fifteen guineas.
This happened like the case with Fitzgerald, who recovered in the
wonderfully short space of two days. After the order had been made
known and proceeded himself for inspection before the same Medi-
cal Officer under whose care he had all along been, he was rejected
not from physical disability, but from mental insufficiency. He succeeded
shortly afterwards in enlisting in another regiment where doubtless
he had an early opportunity for returning his old habits.

Mild but firm measures will be found generally to succeed best.
As they lead to throw a man into despair and when hope is abandoned
he will generally return to his duty if he can be quietly in hospi-
tal terms "lie down softly." Mr. Marshall mentions that a friend
of his had been very successful in inducing melancholics to give up
by addressing them in the following terms after he had had them
some time under his care: "I have carefully investigated everything
attending to the pains you complain of. You do not suffer so much in
intensity as you state. I perfectly comprehend your drift. You wish
be discharged from the service. The plan will not succeed. Take my
advice. Get well as fast as you can. Whilst you continue to complain
of lassitude and disability it will be necessary to check you on
your diet; but as soon as I am informed that your health is improving
you shall have full diet and it shall be continued for a week or ten
days, when you will be able to do your duty. Do not think your case re-
quires the further use of medicine." He adds: "Some individuals
often the highly indigent at an insinuation of this kind.
However, we further notice is apparently taken, if there is a just impression, accept the full diet under an implied agreement that they are to return to their duty and have no prospect of success in their scheme. They eventually give in. It may sometimes answer to pretend to believe every word a patient says and to live in a really hospital discipline and by the constant administration of pharamacopsia drugs such as to make him, a patient, delirious, the latter being a mixture of all the most nauseous and disagreeable articles in the Pharmacopoeia, and is administered in small doses at short intervals to allow the patient continually in the mouth. Before trying this mode of procedure it ought, like ascertainment, without a doubt, that the patient in malingering as the treatment would be very likely to drive away a patient who was really suffering from disease.

Shame may be beneficially exerted by seeming neglect and by the sufferings of his companions.

Shame may be awakened. With good results by speaking in the patient's hearing of some positive remedy, such as amputation or the application of the actual caustic, or of the necessity of removal to a hot climate, which would resemble certain conditions if it was suspected that the malingering had been adopted in order to avoid surgery. Patients have been known to have allowed themselves to be laid on the operating table and the knife brought about their
Unconscious excitement without awakening the suspicion of the patient as to its having been done. Proposed to remove it; some time more effectual than pain given reflected would prove of his own accord in the case of a man who pretended he had lost the sight of his lower extremities on being ordered to Africa. After having resisted all means employed to make him give it to this he was applied to his feet without his being made aware of the nature of the substance. He was heard groaning, and moving about his bed all night, and in the morning he declared himself ready to go whenever he was ordered.

As an instance of the difficulty which exists in making a man upon his resistance to the sedative, I will quote from Dr. Marshall's case of Port-Duquoin, a native of Galway who in the year 1841 enlisted into the H.E.L. Company's service. After being a few minutes at the depot at Chatham, he complained of loss of power in his right leg and thigh which he attributed to a fall which he received when descending the rampart stairs. After being a short time under the care of Dr. Davies he was removed to Fort Pitt general hospital where he remained about a year. In August 1832 he was examined by a medical board who came to the conclusion that he simulated it to a greater or less degree and recommended him to be discharged. Their finding not being considered satisfactory at the first instance he was examined by another board in September, who reported that he laboured under chronic ulceration of the
light relief, and although they considered that the disease was in a great measure remedied, they thought him unfit for the field service and did not think it likely that he would be fitted again for the service if discharged. While he was at York, in January 1837, he wrote to Colonel Hay, who then commanded the depot, stating that his health was in "a most deplorable condition" and applying for a pension as he had been disabled in the service. A few days after this he enlisted in the 87th Regiment, from which he deserted in March. In July of the same year he got himself examined by the assistant surgeon of a regiment in order to obtain a pension. The surgeon certified that he was disabled "in consequence of an injury in the breast and right thigh, and that he was incapable of earning a livelihood from the above cause." In February 1838, he surrendered himself as a deserter from the 87th Regiment and at the time was a well-made, healthy, active, young man.

If a medical man should hold out after the medical officer has exhausted all the means in his power to induce or to make him return to his duty, and after he has by careful examination and mature deliberation come to the conclusion that the man is concealing, he should threaten to report him to his commanding officer. He may then allow a few days to elapse before he let the man quietly, give him a warning, and then proceed. If, however, he still persist in his conduct, he should be turned out of hospital and reported to the commanding officer. He shall be punished as he thinks proper, but the surgeon should never take it upon himself to punish an offender.
End of Medical/Surgical Journal No. 07.
Myth regard to the detection of malignant or a medical man must be strictly conversant with the Anatomy, Physiology, and Pathology of the human body, and also with the actions and uses of the various activities of the materia medica, he must exercise great patience and perseverance, and must never employ any measure in a suspected case which he would regret having used should the disease subsequently turn out to be real. Build but upon measures will succeed much better than much vice, and with regard to this Dr. Theyne remarks, "That many accounts incline to formulate as their first principle that remedies should be by midst I because treatment been converted into excellent soldiers." Dr. Marshall says, "That an intimate knowledge of the habits, duties, good and bad qualities of soldiers will have much effect in preventing the medical man being surprised." Dr. Theyne remarks, "The soils of soldiers will be discovered with more certainty by those who have an accurate knowledge of disease obtained from clinical observation and pathological writings of authority, than by those professing medical science in the highest degree of uninstructed by a habit of carefully contemplating a disease." And again, "That I am convinced that simulated diseases will be discovered by those who conduct the inquiry in the most scientific manner, carefully applying the principles of the description of the diseases in standard works on pathology."

The first thing a medical man should understand is kind act in a suspected case is, what the patient's previous health habit of body.
and mode of life have been, whether there was any predisposing cause in the man's system or otherwise in the malady in question. Whether he has ever been subject to similar attacks before and if so to what they were supposed to be attributable, whether he can have any motive for stimulating, for instance whether he had exceeded his strength, or to happen or breach his discharge, whether he has been in hospital before and if so for how long a time and with what complaint, also what his prospects in civil life are should he succeed in obtaining a discharge. A man's character must not be taken as a guarantee that he is not malingerous as though malingerers are generally men of bad character, there have been men of excellent characters in their regiment and even officers have been known to malinger in order to serve their own ends.

The next step to be adopted is to question the patient himself as to his symptoms, if there be any, exactly what he is accused to have confessed himself or to state symptoms quite at variance with the disease. However, allowances must be made of the patient, he is a nervous temperament and if he be from the lower ranks of life as then he may not understand the question which is put and in neither of these cases may lead the medical man astray by his answers. 

Even although the questions should be made perfectly clear, they must still be given with such care as to suggest the answer.

Exact questions may sometimes detect a malingerer but diseases
detected aesign case of Gouty in a female by aching of
the did not feel on the occass of the disease a pain extending
from the arm to the shoulder and from thence to the abdomen. The
replied in the affirmative and thus detected.

This mode of questioning however should not be too much relied
upon as many patients utters from this weakness on the side
will answer "yes" to a question one animate and the next.

If these means should fail some weak substance to which
great virtues are ascribed may be administered and the patient
asked if the effect of it lasted. Here again however the medical
man must be careful not to allow himself to be led away as
it is a well known fact that medication has a great deal
to do with the action of medicines, so it may be remarked that
medicines administered in this case are not followed by the
same effects as when administered in their similar cases, this
however may be the result of idiosyncrasy.

A medical officer in a general hospital may often obtain great
assistance in the detection of a malignance from the nurses and
other patients, but this is not so easily obtained in a military hos-

tital, the attenders are likely to give information, as they say that
their lives would be rendered miserable even afterwards. I would
then be in danger if it should be discovered by the patients that
they were acting as spies, and thus interfering with their plans
of operation.
It is often advisable, especially in spastic cases, that the patient should be visited frequently and unexpectedly, and likewise during sleep.

By a medical man approaching to undermine the complainant, if the patient is often be induced to alter his symptom and endeavour to make the complaint fit in a more serious aspect and in this manner he may be detected. Rushhall recommends that all suspected persons should be examined naked and privately. As he thinks that when a number of persons are present it leads to encourage the patient to exert in the deception, he also recommends that they should be confined in a separate room, in which they could be watched without their being aware of the fact; and doubtless many cases of deception might be detected in this way. As in such cases will of course cease keeping themselves in any illness; it is order of preserving themselves of the ruse of their limbs, as long as they think they are alone and unwatched.

Hypnosis should however be much less difficult to detect now days, when hypnotism and the use of the ophthalmoscope are so well known, and when we have such a powerful assistant as chloroform aid us in the detection of external delusions such as contraction of joints, paralyzus, and the like: we may also bring the most of the microscopes to our attendance in some cases, as in illegal seizure of pearls, counting of Baronius matters.
Aberdeens Hunterian Museum, 1866.
Exaggerated diseases are more difficult of detection than those which are merely simulated, and it is sometimes a difficult matter to tell how much is real and how much false in these cases. The medical man must make use of all the knowledge he possesses of the usual symptoms of disease, but very often he will have to trust to the patient narrating his past—which he is very apt to do by pretending that his complaints are no better but on the contrary generally worse and that by his own artifices taking medicines and making use of remedies likely to alleviate his complaints, although he may declare himself ready to submit to any treatment.

Simulators are very often detected by some artifice, when all other means have been totally fruitless, or by being taken off their guard and being directed to do something which it would be impossible for them to do if they really suffered from the complaints that they allege they do. M. Hector detected a case of假装ed catalepsy in the following manner. The man stood with his arm a little elevated, upon which Hector remarked to the students that this was caused by the quadriceps muscles in the action to which they had been excited before the lecture. He then continued, "I wonder what additional weight they would support," and to testify he stepped the foot of each hand round the arm and then attached a small weight which produced the motion in the hand. However, on suddenly dropping the end and advancing the hand, it was raised with a jerk, showing that the quadriceps had been
Marshall on the communication of recruits, p. 149
A recruit of the 7th Dragon guards noted that he was unable to drink, in consequence of pain in his right side, which was severe. He said that he could not move without very great pain. On the day after he fell, the men were directed to prepare halting near a lake. Whistler thus employed the adjutant said to the recruit, "If you will show me that place, I will give you five rubles." The recruit, for assumed absent, cleared the lake and of course would convalesce.

A recruit, on joining the depot at the Blame, alleged that he had lost the sense of hearing. Dr. Davie's put him in a room that and men for three days passed his bed without seeing, hearing, or speaking to him. On the sixth day he visited him. He felt his pulse and then asked the recruit, 'What did he face him? He replied that he felt happy, and he accepted the recruit. He was angry and said, "Are you not ashamed of yourself, the poor fellow is almost starved to death, let him have a beefsteak and a pint of water instantly." Upon this the recruit forgetting his defeat exclaimed with a face full of gratitude, "God Bless your Honour, you are the best gentleman I have seen for many a day."

In these three cases, it is most probable, and indeed to one half actually the case that the patients would have existed all curing and systematic disease of detection if that this was only to be accomplished by an infernal act.
I shall now proceed to mention a few of the most common mental diseases giving a brief account of the manner in which each particular one may be detected. When by comparison with what is known to occur in the true disease or by special artifices employed according to the nature and seat of the disease. I shall illustrate each by a case or two.

I shall arrange the disabilities under five heads namely 1st. Those referable to the head 2. Those of the abdomen 3. Extremities and 4. Constitutional disorders.

Under the first head may be considered disabilities referable to the brain. Those referable to the organs of the senses.

Manic is not very often imitated as it requires too much affection in the part of the imitator and he will probably be able to attain his end by some simple method. It can only be detected by one who is well acquainted with the disease in its true form as there are many little incidents peculiar to true Manic which the imitator is either ignorant of or unable to imitate and the want of which will at once be detected. In experience, however, sometimes pretend an inability to learn Portia and

Financial exercise, and it may become a wise question to determine whether the inability is actually from deficiency of intellect or whether it is only assumed. Dr. Magee mentions a case where a man was unexamined as an imitator but those happiness for which Manic was not able to

"A strong active faculty during fifteen months could not be raised from a state of restlessness and inattention to person and duties, he was dis-
to Dr. Burnell to perform the operation. In the absence of every symptom of disease formed the same opinion. A little more than a week's difficulty of articulation became manifest with flicker movements in both and slurred speech in a few days. Some convulsions and death occurred. On dissection two tumours the size of a hen's egg respectively, and of a firm medullary structure were found in contact with each other in the right Occipital lobe of the brain and projecting considerably beyond its boundary."

In such cases as this it will be much better to wait and take the chance of the man giving in a being caught whilst in some excitement than to be off his guard than to have recourse to severe measures.

Epilepsy is a disease not so frequently attended to as other chronic diseases. It is one of the most difficult to be cured, being attended with the fact that by various modes of treatment feverish attacks may be induced by the patient's being given different medicines. Epileptic attacks generally occur at more regular intervals than real ones and at times best suited to excite attention as when the weapon has just been fired. The patient is supposed to have his attack as he is about to have his breakfast, the patient of epileptic also looks out for a convenient place to have his attack so that he may not hurt the side of rushing himself or anyone else. The patient of epileptic has a particular fear of growing old, whereas a true epileptic patient cannot fear the but past several and calls his complaint by some other name. Again in true epilepsy, the patient is quite sensible to all external stimuli that the false epileptic. The simulator of insanity is watched may often be detected.
opening his eyes to observe what effect he is producing upon the eye. The other side and a speedy cure will generally ensue. If not, the patient may be treated with a few doses of a mild expectorant, and be allowed to take a proper diet, after which the patient may be gradually improved. If the patient does not improve, the treatment should be continued until a cure is effected, or until the patient dies. If the patient dies, it is probable that the disease is not cured, and the patient should be treated with the same care and attention as before.

The patient should be watched closely, and the treatment continued until a cure is effected, or until the patient dies. If the patient dies, it is probable that the disease is not cured, and the patient should be treated with the same care and attention as before.

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Beeks Medical Jurisprudence Page 18.
a flannel bandage, rolled up and dipped into boiling water, to
the side, running some under the nails. Dr. Marshall says that he
had found pouring a very small stream of water on the face successful.
Not only in cutting short a fit, but also in preventing its occurrence.
He introduced into the mouth, May also betray the importance by the
effort which he makes to spit it out, thereby showing that he retained
the sense of taste. Dr. Laycock says he has put a stop to a false attack
by calling for water and saying that he must bleed the patient severely.
Dunlop mentions a case where a surgeon who had been called
tomaching that if it was a true case, the patient would turn round
and bite the part he immediately did so and was thus betrayed.
A beggar in Paris often fell into fits in the street. A bed of snow had
been prepared for him through compassion when bent attacked he was
said upon it and the snow quickly set a fire upon which he jumped up
and fled.
A soldier who was subject to fits was detected by the surgeon placing
his hand on his head for a few minutes during one of the fits and
then saying to the hospital surgeon: "It is all over now carry the
body to the dead house." The man immediately started to his
but said he was quite well and never had any more fits afterwards.
The mouth may he stated, i.e., i.e., and in the presence of truth by closing
the mouth with the hand, and then forcing the breath against the
molar teeth. It would be well at the same time to examine whether any
butter was in common in real but rare in false fits.
Cases of假装 Deafness can only be detected by watching the patient's reaction and trying to take him unawares by various artifices such as dropping a piece of money behind him which will sometimes make him turn round, making a sudden loud noise in his ear to cause him to start. Commencing a conversation with him in a very loud voice and gradually decreasing the tone when he will still continue to converse with you. Drunkeness is sometimes combined with deafness. Mr. Marshall narrates the case of a soldier who had figured the defect in order to attain his discharge, some of his companions remarked in his hearing that he would soon be leaving them at his discharge, and it was long from head-quarter upon which he was so forget himself as to give utterance to the most extreme and exclamations of delight. A faked discharge from the ear is imitated by some by making decayed cheese with vinegar. Improved vision or total blindness is sometimes simulated and often actually induced by the application of various irritating substances such as nitric acid to the eyeball. If the use of these substances is suspected, the patient must be stripped and placed in a solitary cell where he is left isolated by no one but the surgeon or any one whom he can place reliance on that the man may have the opportunity of obtaining such articles. Mr. Marshall mentions that in the regiment where Phrenology became very common it was cured by sending an sentinel duty each of the men to affected along with a conductor, as their sense of hearing might become as useful as that of sight. Disease of the Galzhesia is sometimes treated by pulling out the eyeballs and applying caustic.
III Diseases susceptible in the region of the Throat. Inflammation of
organs disease of the Heart is sometimes to be met with. Hutchinson
mentions that it was introduced into the Royal Navy military about
the year 1822 by a man of the name of Chapman who had also intro-
duced the practice into St George Hospital having first tried it himself,
but with no success as his character was well known. The drug which
this man used in order to produce symptoms simulating disease of the
Heart was the juice of Balsam pellitory, he regulated the dose so as to
produce a sudden illness. In the operation, a dose gradually undermined
the constitution and produced violent palpitations along with great
weakness and faintness. Several patients underwent great sufferings from
being this drug and some actually produced the disease in which they
intended to simulate. The full dose varied from two spoons to a
cupful and a half. Chapman told the patient at the rate of four
spoonfuls a dose or the communicatist the secret in the form of three
and a half. The means of detection and consequently cure consisted
in withdrawing the patient and removing them to separate wards where
the nurse was admitted except the Medical attendant and nurses; the
nurses of the dress being thus put off the patient quickly recovered that is to
say if the disease was really septic. Latterly cases could be detected by the
specific expression of countenance which the patients presented.
The circulation was also been greatly disturbed by the application of light
ligatures round the neck and opposite part of the arm, and it would often
that some patients gained the sense of voluntarily clenching the teeth together.
Hernia is generally stimulated by pushing the fingers, such as a great of the mouth, and touching the neck, therefore, it is to be detected by narrowly examining these parts to detect such injuries and also by minutely inspecting the mouth, as also by examination with the stethoscope and perceiving to discover whether there be any affection of the lungs likely to give rise to such symptoms.

III. Diseases referable to the Bowels of the Abdomen and the pelvic organs. Chronic vomiting may be imitated by those who naturally possess the power of vomiting, the whole or a part of their food at will; or it may be produced by pain present in the stomach under the bed of the patient. Stalhinus mentions a case where a man who was in the habit of vomiting daily as the surgeon was making his rounds was detected by his having a little before the visit and holding the hand under the vomiting, that it did not stay although a full dose of salt or a substitute was administered to reduce it. In several cases there will likewise be an absence of that part and peculiar muscular present where the vomiting is the usual seat of disease of the stomach.

Nystagmus is stimulated by swallowing quantities of water obtained in previous swags and then vomiting it.

Vomiting is stimulated by elevating the back, as the patient lie in bed and thus protruding the abdomen; it is also caused by swallowing air or large quantities of baps diluted with a little water.

Insults is often stimulated by patients who have returned from the East or West Indies, or as a reason to be invalided and sent home from such tours. With regard to their case, Dr. Hughes suggests that the patient
H_SMALLER_BUT_UNDER_A_TEXTURE_OF_MERCURY, BECAUSE_BY_THE_B-COMING__THAY__IN_HOSPITAL, HIS_PAIN_WILL_BE_INCREASED_AND_THE
_CONSTI_TUTION_IMPAIRED__AND_HE_WILL_SNEETLY_APPEAR_RETURNED_TO_HOSPITAL_SAYING THAT_THE_PAIN_IN_HIS_BED_GET_WORSE.Whereas_HIS_BREATH_GET_WELL.

DEPRESSED_INCONTINENCE_OF_WAINE_MAY_BE_DETECTED_BY_GIVING_THE_PATIENT
A_DOSE_OF_LANDACINE_AND_THEN_PLACING_A_DRY_SHEET_BETWEEN_HIM_AND_THE
DRY_SHEET_AT_THE_END_OF_A_FOUR_HOURS_BEFORE_HE_ATTEMPTED_A_SPUTUM
PURSERSE_MAY_BE_DETECTED_BY_MAKING_HIM_BREATHE_A_TUNNEL.

IN_CASER_OF_SPUTUM_THE_SPUTUM_MUST_BE_EXAMINED_HISTORICALLY_AND_MICROSCOPICALLY,

A_BUT_ITS_DESSEMINATED_AS_WELL_AS_SIMULATED_AND_THE_SPUTUM_ESPECIALLY_BY
WOMEN_IN_ORDER_THAT THEY_MAY_PRELUD THAT THEY_HAVE_BECOME_DESSEDIC
_IN_HIS_TERMATE_AND_OBTAIN_A_CERTIFICATE_FROM_THE_SPUTUM.TO_THAT_EFFECT

WHICH_CERTIFICATE_ENTITLES_THEM_TO_A_FREEorary.A_MEDICAL_MAN_HAS
NIGHT_PLE To_BE_CAREFUL_IN_THEERVICE until HE_HAS_PERFECTLY_SATISFIED_HIMSELF_THAT_HE_IS_NOT_SUFFERED
AND_AT_THE_WEAPON_BE_CAUGHT_BUT_TALOR_HIMSELF_LIKE_SUFFERED

WHEN_BY_A_MAN_SIMULATING_SPUTUM.A_SIMULATING_OF_SPUTUM IS TO_BE
DETECTED_BY_MAKING_THE_PATIENT_ELEVATE_HIS_ARMS ABOVE HIS HEAD_AND
WHILST_IN_THAT_SITUATION_CAUSE_AVOIDING THE_BREATH_IN_THE_MEANWHILE
PLACING_HIS_HANDS_ON_THE_SDIGS_OF_THE_OBLIQUE_MUSCLES;SPUTUM IS
SIMULATED_BY_REFLECTING_THE_SEEDUM_WITH_A_RUJ BY_BRACEWAYS_THE_PROCESS
WITH_A_FINGER, BY_PULLING_THE_SPUTUM_OUT_OF_THE_SEEDUM_INTO_THE_FINGR
TOWARDS_THE_EXTERNAL_ATOMICULAR_END. HUTCHINSON_MENTIONS
A_CURIOUS_CASE_OF_AN_INDIVIDUAL WHO_PROVED THIS_PROCESS WHICH
I shall now quote the rater that it was the only case he knew in record of the presence. He states being overcome by will, but Dr. Matthew says that he had been a number of persons who had called the power of voluntarily exercising these muscles. In the year 1787, whilst serving in H.M.S. Druid off the coast of Madeira, a merchant ship was boarded from which an English seaman was impressed. He says he was detained was taken to the cockpit for examination.

This man stated that he was explained to both points and that he had been examined a dozen times by the surgeons of different ships. It was often suspected of being addicted to drink, but the weather being very hot and the seaman consequently sleek. The Hutchinson’s attention was directed to it when he found that it was easily and that it was the latter which was lodged in the spine. The man pointed out that his trick was discovered proceeded to show the force he possessed over the spine. He pulled them both up at once and as suddenly let them drop again. He then pulled one up and after a little pause the other and then let them fall simultaneously. He could also pull one up whilst the other one was descending and vice versa with considerable speed.

A receipt for treating a rupture was picked up in a ward of one of the Dublin hospitals. The treatment was the sandwich with a cocking line and the break up with air by means of a piece of hose. If a double rupture was desired both sides were to be treated. The Prussian blue was then used to apply to allay the inflammation.
IV Chronic Disease and disabilities of the Extremities

The most common alteration of this fluid which are determined are those which may be easily detected and approximated. The principles most commonly adopted for inducing them are by means of the application of some strong or severe, or the extraction of a small amount of hair. The process is generally effected by means of a needle or blunt instrument being passed through the skin, which is then stretched. This may technically be termed denuding. The practice for a long time was to apply a bandage a considerable distance above and below the effect and then to seal it, but it has been discovered by patients that this effect is much more perfect by following it. In dressing, it is necessary to prevent the device from drying too much. It should be made to adhere to the dress made in the shape of a large square boot, and long enough to reach from a few inches above the knee, the upper end of the boot being closed by a square piece of wood with a circular hole cut in it large enough to admit the finger. Two holes were made in the sole of the boot to admit a tube which was fastened to another made fastening round the patient and to that he would not be able to draw it by the tube. The part of the tube was made to open with hands.
and a clock being set on the top, was kept in readiness. He also had "Punishment in Simplicity" painted in large letters on the front of each box, and two or three of them placed in a conspicuous part of each ward, to act as a warning to all new patients. This plan succeeded so well in his hands that latently to notorious did Deal hospital become for the detection of impostors that it was a very rare occurrence for any such characters to present themselves for admission although before that time they had been very numerous. To this occurrence he attributes the efficiency of the fleet at that time, employed in the blockade of the Scheldt.

The same author mentions the case of a man whose leg he amputated at Deal hospital in consequence of cancer of the skin extending upwards from the ankle joint near the knee joint. The man declared that he had never "played any tricks with his leg" until thrown a copper coin which had been planted between the gastrocnemius and tibialis muscles. The coin was found embedded between the gastrocnemius and tibialis muscles, the man confesed that he had thrown it into the uncle about nine months before in order to obtain his discharge. The coin had punctured to about three inches from the margin of the flesh.

Wiers are sometimes imitated by placing in a piece of aleen or the skin of a pig and keeping the surface moist by means of a sponge dipped in a mixture of milk and bread. It seems quoted a case from Pierre Véray who says that he had been a berman-
present itself before the late King of France to be touched by him, with an apparently large ill looking Cancer of the breast, he had led to suspect direct from the healthy appearance of the woman and in touching the place he discovered that it was a bit of flint placed only by its inner side to the nipple and preventing outside a reddish brown kind of matter from the seat of cancer. When removing it the nipple appeared quite healthy.

The next most common affection under this head are Paralytic and Contraction of joints, which may be considered together, because the means employed in the detection of one will in most cases be applicable to the other also. Paralytic is sometimes very difficult of detection and is generally discovered by accident or accident. In cases of contraction of joints Hutchinson recommends the administration of an emetic and then taking advantage of the loss of muscular force which precedes the inclination to straighten the limb. The same end may also be attained by fixing the patient's attention on something or engaging him in conversation in order to take the influence of his will off the muscles. Marshall says that he has known this class of indulgiause yield to the repeated shocks of electricity. In contraction of joints we have now a days an excellent if not an infallible means of detection namely Chloroform which I think might also very frequently be useful in cases of Stiffened Sphincters from its tendency in some persons to induce violent action of the muscle.
Mr. Hutchinson detected a case of hemiplegia in the following manner. The patient was a seaman and was admitted into Naval Hospital with paralysis of the right arm. He caused sixty drops of laudanum to be administered to the patient in two doses. In two hours, he then directed four late at night accompanied by four hospital mates and three nurses. Having approached the man's bed, he proceeded to tickle his right ear with a feather. Upon this, to the astonishment of those present, the paralyzed hand was immediately raised and applied to the injured member with considerable force, the patient then turned over in bed, dragging the clothes over with the same hand. This was again repeated on a second application of the feather, when the patient was caused by the loud laughter which ensued and springing out of bed, he caught Mr. Hutchinson with both arms round the neck, exclaiming: "I hope I shall meet with you in some day in a dark corner."

The following case related by Dr. Studdard shows the extreme gratitude with which some patients display their thanks. A private belonging to the 9th regiment, whilst it was in duty in the Mediterranean, declared that he had lost the use of his inferior extremities and for about two years resisted all means that were tried in order to detect them. Before he was recommended for the hospital, he was subjected to the following treatment: he was confined in a small space, and a shelf full sized...
With provisions was suspended near his head in such a manner that he could easily reach it by standing on his toes but not otherwise. At the end of four days the food remained untouched and it was not considered safe to leave him any longer without food. He was then invalidated and put in box a transit boat in order to be sent to England. Whilst in India some alarm was given that the ship was on fire, all hurried into a boat and on the斑南

fear being stoutered after reaching the shore, four men were found there dead not only himself but also his hands and clothes.

Kettlenson says that when entering the D making the book pretended to have a contracted elbow joint, he was suspected to be participating in smuggling so it is learned in the many years he was suspected to the captain in order that he might be punished, then the captain refused to desist but the man could be thrown into an inferior, Kettlenson requested him to engage the man in conversation and whilst the man thus occupied went quietly behind him and easily accomplished the extraction of the book.

Smuggling is often adopted by soldiers to relieve their distress.

It is either proved by what I have been told or by the

man's account of the manner in which he was received into the service.

It is either proved by what I have been told or by

the man's account of the manner in which he was received into the service.
with the consideration of collateral circumstances will very probably determine whether the wound was voluntary or not. For instance an individual pretended to have a murderous conflict with some assassins. His head was wounded in a longitudinal direction from left to right to the extent of about an inch, the integuments only being divided. His hat was cut to the extent of three inches from right to left, a cotton bonnet and a handkerchief beneath the bone under his hat being also divided. In addition to this the knife with which he pretended to have killed his attendant was highly covered with blood. The whole affair was announced to the authorities as a case regarded the encounter with an assassin first because a blow sufficient to divide his hat it would in all probability have inflicted a deeper wound on the skull secondly the wound in the head and that in the head did not correspond in direction, thirdly the knife instead of being dished with blood would in all probability have had very little upon it and that little in longitudinal stripes if used as accepted to stab his enemy and lastly the body of the said person could not be found.

A soldier came to hospital with his thumb amputated, all but a small portion of skin on the palmary surface of the hand, which he alleged to have been caused by his falling on some broken glass at the bottom of the banquets chair, where the remains of a broken bottle were found, he was however unable to state why the skin on the part of his hand was reason if he fell forwards on the floor.
Sir George Ballingall mentions the case of a man who shattered his wrist by falling from a window in order to put his horse and fence down, in which he failed. However, Sir George was advised to amputate the hand, after which the patient coolly said, that if he had been a sparrow he might amputate the wing, and if he was punished for having voluntarily dressed himself and finding that his plan had failed, he dressed himself.

V. Diseases referable to the disorder of the constitution.

Under this head I shall consider Rheumatism and Pain which are very often stimulated. Pain like Epilepsy is a disease which does not require any care on the part of the patient, and can be resisted by them. In any part of the body, internal or external, and of course in very many cases, we can deny that it does not exist. Indeed, in all cases, because although circumstances may prove the presence of disease, still we know that it may exist and has done so without any external signs presenting themselves and it would therefore be wrong to accuse a man of malingerism merely because he could not discover any signs of disease. The means to be used for detection are principally those of questioning and strict attendance to the symptoms which present themselves. Thus external pain is generally accompanied with swelling, redness, internal pain with various symptoms according to the different organs affected, thus severe pain of the head is attended with loss of sleep, of the stomach with colic; towards cold, cold colic, vomiting, point vomiting, and in the manner.
All the other organs have through symptoms. Simulates generally, give a stronger account of their suffering complaining equally at all times and never obtaining relief from any remedial treatment. On the other hand in true cases the fever is constant and last for periods of unction, according to the time of day, state of the weather etc. The next thing to be attended to is the patient's appearance connected with the duration and intensity of the disease. It has been very severe and continued for some time, he is generally pale and wasted, and of an uncommon cast of countenance, he loses his appetite and becomes listlessly about as if he is capable of motion. On the other hand, the malady, usually plump and healthy-looking cats and sleek well and is most and cheerful and erect at more times when he wishes to make the most of his alleged ailment.

Dr. Nate, deputy inspector of hospitals, had a case under his care of a young soldier who was supposed to be suffering from chronic rheumatism, with contracted joints, whenever he was moved by putting it to bed excessive of pain, having exhausted all medical means, he was discharged as incurable and four days after was seen prospecting the reception of a landscape. His statements concerning his malady had never been doubted, nor was it at all suspected that he was shamming, so this is a proof that all men may be detected and an impostor consequently detected.

Intermittent fever is sometimes simulated by men who have returned from hot climates, the fits generally managing to recover as
Edinburgh Medical and Surgical Journal No. 09.
The medical officer is making his rounds. Dr. Hayne mentions that in one case where he suspected that the man was an impostor on giving his sounds one day he was told that the patient was just then in the cold stage, in turning down the bedclothes however he found him in a violent perforation. In consequence of the great tendency he was making, pus was trickled and over the whole room to the bed. A dry brown tongue is indicated by substituting it over with soap, a white tongue by rubbing it with fuel, both these artifices are of course to be detected by making the patient wash out his mouth.

A rapid pulse may be caused by the use of certain drugs and various other means, as enumerated under Head disease.

A pale livid appearance as if from some looting disease seems sometimes to be induced by drinking large quantities of a weak solution of tobacco.

Even death seems sometimes to have been simulated for the attainment of some object. Mr. Marshall mentions the following case in India one morning the body of a native was brought into a tent, where some of the officers of a company of seaports were just sitting down to breakfast, and was laid on the floor. Then three buttons of the jacket on the body and the sheet covering it was bloody. The friends stated that he had been murdered by some of the seaports, who were accordingly instantly paraded in order that they might have an opportunity of pointing out the murderer, that however they were unable to do.

In returning to the tent one of those present on taking the blanket off
Dr. Cheyne's letter to Dr. Kenny. Dublin Hospital Reports, vol. IV.
The fear that he would try the effect of vicious and bloody behavior on the dead man's leg, the effect of which was that the man immediately started to his feet and ran off. It was found out afterwards that this man had received some slight injury from the hogshead and it was supposed that he had helped either that the commanding officer would have given his friend some money to make the business in lieu that his vengeance would have been satisfied by the hogshead being severely punished.

I should bring this essay to a conclusion by quoting from D. Chevigne the following rule for the conduct of the Medical Officer in Cases of Mutilation in the Army:

"14. The Medical Officer must not allow even a faint suspicion to deprive him of his temper, he must listen to the most contradictory statements not merely with patience, but without seeming the slightest distrust, in short his manner must be the same to a soldier labouring under strong suspicion of fraud as it would be to the best man in the regiment and he will in general find that complete ignorance of his sentiments will more than any thing the circumstance the mischief.

23. If the case is evidently forged he ought to take the mutilated aside, mildly expostulate with him on his folly, if necessary threaten to report him to the Commanding Officer, if he should still persist in his misconduct, a proper attempt to keep sickness by which means many a good soldier has been reclaimed who had he
been exposed to shame would have become callous and heartless. 3d. If he should act by means of persecution, and if the fraud be palpable, he ought to take the malice of the patient and without procrastination in the pretended complaint lay the case before the commanding officer. 

1st. But if his grounds of suspicion can not be conveniently stated he must cautiously conceal his intention until by patient investigation all his doubts are removed and a satisfactory report of the case can be prepared.

2d. In this state of the enquiry he must employ no means but such as would be applicable to the case before him. He must not on his own authority employ any coercive or penal measures not even irritative applications. He must use medicine as he would, unless such would be just here the disease dealt.

3d. When after the fullest inquiry he is convinced that the complaint is unfounded & the disease fabricated, and shall have reported accordingly to the commanding officer, the case is in his hands through the hands of the truth will often bring him to resume his duty. The commanding officer if he is a judicious man and exudes confidence in the patient, will take the advice of the latter relative to the treatment of the malice, and will authorize any measures which medical experience may suggest. Restraint or punishment in hospital under the sanction of the commanding officer may in some cases be useful.
If the malpractice should still persist in the course of imprisonment it is customary to punish him before a court-martial. It would appear wise that a board consisting of at least three medical officers of mature experience would be found a better tribunal in the first instance. If the medical board should report favorably of the accused, he will be discharged from the service and the uniform relieved of a case of indiscretion, but if unfavorably he must then abide the sentence of a court-martial.

Henry R. MacDougall.