CASES OF MOTIVELESS SIMULATION OF DISEASE.

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BEFORE the interest awakened in cases of simulated disease, by the tragic history of the Welsh fasting girl, has entirely passed away, I may be permitted to contribute to the literature of the subject the following four cases which have fallen within my own experience.

If we exclude vulgar malingerers who feign disease or disability for some plainly intelligible purpose—to escape military service, to avoid punishment, to provoke pity or charity, to obtain compensation for alleged injury, to procure release from confinement or irksome duty, or for some other comprehensible purpose of fraud and imposition—there still remain a number of very remarkable instances of simulated disease where the motive to deceit is either altogether inscrutable, or is so greatly out of proportion to the inconvenience and pain and danger of the condition simulated, as to suggest an aberration of mind approaching—if not actually reaching—the confines of insanity. It is not at all inconceivable, *a priori*, that there may exist individuals afflicted with an irresistible impulse to deceive; just as there are confessedly cases of irresistible impulse to set things on fire (pyromania), or to steal (kleptomania), or to drink stimulants to excess (dipsomania). These latter are recognised by psychologists as forms of mental unsoundness, which absolve, partially at least, the subjects of them from the full moral delinquency of their acts.

I am conscious that a heavy responsibility attaches to any one who, on inadequate grounds, throws the almost sacred shield of a plea of irresponsibility over any class of moral or civil offences; and that the discipline of society might be seriously weakened by a too ready admission of such a plea. Nevertheless, we are bound to look facts in the face; and if there really be cases in which persons appear to be impelled, by an irrational impulse, to acts of imposition and deceit, we are bound to recognise their existence, and to pause before imputing to such persons the full quota of guilt which would attach to their acts if their minds were in all respects sound. To the friends and relations of these unfortunates, the recognition of the existence of such cases would also yield very real consolation.

Examples of motiveless malingerers are most generally found among girls and young women, and they have, as a rule, a decidedly hysterical complexion; but occasionally we meet with instances in women advanced in life; and the most singular of the cases that have fallen under my own notice was in a boy of fourteen. The most familiar types are those in which persons feign to pass pieces of coal or pencil, snails, and various worms with the urine or fæces; or when discolorations and eruptions of the skin are artificially produced, and palmed off as genuine diseases. In rarer instances, the deceit sought to be practised is much more elaborate and much more difficult to detect; indeed, the perverse ingenuity sometimes displayed is such as altogether to baffle every inquiry, and to impose permanently on the patient's friends and the medical attendants.

The following cases are very diverse in their character; and one of them (case ii) almost conforms to the type of a genuine hallucination.

CASE I.—*Efflorescence of a White Powder on the Surface of the Body, which proved to be Starch.*—A maiden lady, aged about five-and-thirty, complained that a fine white powder exuded through her skin, filling up the cutaneous wrinkles and crevices on the face, hands, and surface generally. When washed off it soon returned again. This phenomenon excited much marvel and interest among her relations and neighbours, and puzzled her medical attendant. It was suggested that something was wrong in her drinking-water, and a chemist was called in to make an analysis. The chemist reported that the water contained an excess of carbonate of lime; and it was thence conjectured that the excess took this extraordinary method of working itself out of the system. The lady's own opinion was, that a piece of glass from a bottle she had broken some time previously in taking out the cork, had entered her hand, and had never been properly extracted, but that it had passed into her body, and was now exhaling through the pores of her skin. At my request, a portion of the white powder was obtained for examination. I found it to consist of wheat-starch. It was evident that this poor lady must have been in the habit of dusting herself with some of the powders in use to give brilliancy to the complexion, and that under some inexplicable motive she was trying to impose on those around her.

CASE II. *Insects floating from the Hair, which turned out to be Flakes of Soot.*—A married lady, of about 50, called upon me some years ago, stating that she was suffering from a very mysterious and distressing complaint. She went on to say that every evening when

the lights appeared she began to be afflicted with a plague of insects coming from her hair. She could see them swarming down from her head in vast numbers; and when she went into society in the evening, she remarked that those who sat next to her became uneasy and restless, showing evident signs that they were annoyed by the insects which came from her. They continued to torment her until she put out her light on going to bed. In the morning there were no traces of them to be seen; they had, as she alleged, retired into the pores of the skin, where they remained dormant until the evening lights brought them out again. She gave the most circumstantial account of their appearance and behaviour. When she shook her head over a basin of water, the insects fell in myriads into the water, and moved about actively for a considerable time; but if they were allowed to fall into hot water or into whisky they immediately became still, and died. She was a person of scrupulous personal cleanliness; and the most careful search failed to detect any traces of parasitic vermin. I prescribed some draughts, and requested her to send me some specimens of the insects for examination. Four days afterwards, I received the following note.

"Sir,—I have taken the four doses of the draught which you prescribed for me, and find myself much relieved from the annoyance. I send a small packet containing the insects; should it be necessary that I should have another prescription, I will thank you to forward it to me as per address. I shall take the first opportunity in my power of calling upon you in Manchester. I am, etc."

The packet mentioned in the note was a small phial carefully corked. This contained (besides a toilet-pin, a dead house-fly, and three long hairs) a large number of dark flaky particles like soot, floating in whisky. A fortnight afterwards, she called again, stating that her complaint was as bad as ever. She produced a folded sheet of note-paper, which she said contained some of the insects. When this was opened out, I found it to be thickly dotted over with flakes of soot, just as if it had been held for some minutes under a smoky chimney. She assured me that the black particles were all alive and moving when they were placed on the paper. She called on me three or four times subsequently. I never could detect in her the slightest indications of any delusion or hallucination on any subject save the insects; yet I could not quite satisfy myself that in this case the patient was not in some degree herself a victim of the imposition she sought to practise upon me. She appeared very anxious to be cured; and when she found me incredulous, she at length intimated that I lacked penetration to fathom the real nature of her case. Quite recently, I have learnt the following additional particulars about this case. The patient is now perfectly cured of her notion about the insects. She has always been a great reader of medical books, and gives much trouble to her medical attendant by her various fancies; her intellect, however, continues quite unimpaired.

CASE III. *A Living Frog discharged with the Stool by a Woman.*—Nine years ago, at a meeting of the Manchester Medical Society, Dr. Browne exhibited a frog which an out-patient of his at the Royal Infirmary had sent to him, with the following letter, which he has kindly permitted me to publish. I must apologise for reproducing *verbatim et literatim* this comical epistle; but it gives a circumstantial account of the occurrence, and, withal, reflects so perfectly the mental state of the patient, that I venture to do so.

"Tyldesley, January 21st, 1861.

"Dear Sir,—I take greater pleasure in writing to you a few more lines hoping the will find you in good health as I am very Glad to inform you that I am a great deal better than the last time I sent you word how I was I am not as much swelled as I was you will please Examine in this Extra bottle it was on Wednesday morning last between 10 & 11 I wanted to have a stool very bad and before I could get to the poe this animal Dropped from me I never was as surprised in my life there is Different opinions About it at Tyldesley but Mr. Browne I Leave my opinion whith you, you are the person I think should be the likeliest to know what to do the best it was a deal larger when it came from me it was a live but soon died when I had Examined my Stool I washed it and then I sent for the druggist a young man in the name of Joseph Wall-work and he took it whith him and put in Spirits of wine for me now my dear friend I hope you will do your best yet for I must inform you that my belly is a deal looser and I feel a deal smaller than what I was I have given you the state of my body as well as I can this time I will let you no every time if I dont come my self I must conclude by wishing you success in every case you take in hand yours &c Mrs Harwood formally Ainsworth."

When the frog was dissected, remnants of a fly were found in its stomach; this disposed of the surmises of some of the members that the frog had actually grown up in and passed through the woman's intestines. The only real question in the case was whether or not the woman was herself deceived; whether, in fact, the frog was not simply hopping about the floor, and that the woman, finding it there, had imagined the

rest. It is difficult to reconcile such a supposition with the circumstantial description of the occurrence given in the letter. It seems more probable that the woman was acting under an irrational impulse to deceive; and the hypochondriacal vein running through her letter, and especially her laborious anxiety to describe her very trivial symptoms to her physician, indicate exactly the *malade-imaginaire* type of mind in which such an impulse might be expected to arise.

CASE IV.—*A Boy Vomiting large numbers of Membranous Tubes, which turned out to be pieces of Arteries.*—The subject of this singular case was a well-grown healthy boy of fourteen. He was sent to me by his medical attendant from Oldham, with a request that I would take him into the Infirmary, and have him watched. The boy was accompanied by his mother, who produced a piece of glistening membranous tube, three inches long and as thick as the thumb, which had been vomited by the boy, as she alleged, as they were coming in the train. I had no difficulty in recognising this as a piece of the thoracic aorta of some animal (probably a sheep), turned inside out. She further informed me that the boy had vomited similar tubes almost daily, and sometimes two or three times a day, for the last two months, and that she possessed at home a large collection of such pieces, which had been preserved after being vomited. I found that the boy was her youngest child (she was a widow), and evidently the pet of herself and of his two grown-up brothers. She expressed great concern about the boy's ailment, and the boy himself seemed very anxious to be cured. She stated that the complaint commenced with vomiting of blood, and that afterwards the tubes appeared; that, when the tubes were vomited, the boy suffered extremely; that he became swollen about the neck and black in the face, and well-nigh choked. He never vomited any food with the tubes; sometimes they were tinged with blood, and sometimes not. At times he was so ill that he kept his bed for several days, and at these periods he brought up numerous tubes. I wrote to the boy's medical attendant an account of my discovery (saying nothing to his mother), and suggested that, before taking him into the Infirmary, a strict watch should be set on foot at home, and that inquiries in all the butchers' shops and slaughter-houses in the neighbourhood should be made, in order to ascertain where the boy procured his pieces of arteries. I also desired that the collection of tubes should be sent to me for examination. All this was accordingly done.

The collection of tubes arrived in nine pickle-jars. All consisted of pieces of arteries of various sizes, evidently obtained from the carcasses of animals slaughtered for butcher's meat. I found no difficulty in matching every variety of them from the carcasses of sheep and oxen hung up in the shambles. The total amounted to fifty-five pieces, weighing altogether two-and-a-half pounds. The greater number were pieces of the thoracic aorta of sheep or lambs, varying from two to nine inches in length; these were all carefully turned inside out. There was one piece of aorta nine inches long, which was not turned inside out, with a big lump of fatty tissue attached to one end of it; this weighed a quarter of a pound. Another piece was still larger—sixteen inches long and half a pound in weight; this was turned inside out. A large number consisted of smaller arterial trunks—pieces of the abdominal aorta and its branches—varied in size from a goose-quill to the thickness of the little finger; all these were turned inside out.

All the watching and inquiries proved utterly unproductive, though carried out with scrupulous care and trouble. The boy's brothers, as they informed me themselves, watched by his bedside days and nights, and witnessed over and over again the boy bringing up, with apparent pain and imminent suffocation, pieces of tubes which, they alleged, it was impossible for him to have procured and swallowed beforehand without their having detected him. No traces could be found of the boy's visits to any of the slaughter-houses or butchers' shops in the neighbourhood.

At the end of a fortnight, I took the boy into the Infirmary. He was perfectly sound in all his organs. His appearance was somewhat girlish, but simple and ingenuous. He vomited up a piece of aorta as my clinical clerk was taking notes of his case, and another piece was discovered hidden among his clothes. When asked about this latter, he answered that he had vomited it on his journey, and brought it to show the doctors. He remained in the Infirmary ten days, during which time he was quite well, and vomited no more tubes. Mr. Fletcher, my clerk, stated that he found him vigorously sucking his gums on one occasion, and spitting out a bloody sputum. When he was told that his imposition had been discovered, and solemnly adjured to confess where he had obtained the pieces of tubes, he simply replied that he "got them from nowhere"—that "they came from his inside"; and, when more strongly urged, he began to shed tears. All the endeavours of nurses, students, and of myself, and even threats of corporal punishment, which were used without my sanction, failed ignominiously to extract a word of confession from the boy. His mother

and brothers likewise continued, in spite of the clearest demonstrations, quite unshaken in their belief in the genuineness of the symptoms. Ten days after the boy's return home, I received the following note from him.

"Dear Sir—I write these few lines for what you have done to me during the little time I have been at the Infirmary; but I am very sorry to say that you have not cured me; and I am very glad to say I have not yet vomited any more of the tubes, and I have begun to vomit blood. I have vomited blood three nights together, and spit a little on Sunday night; and, if you desire to analyse any of it, it will be a great pleasure to us to send you a bottle of it. In concluding, allow me to thank you sincerely for your kind service while under your treatment. I am," etc.

I did not, however, care to follow the case further. The family of which this boy was a member was of the respectable artisan class. They lived in comfort and abundance. The boy himself was a factory hand; he was quite comfortable in his situation, and professed himself anxious to return to his work. No conceivable motive could be assigned for the imposition. The boy bore an unblemished character for truthfulness; and of the *bona fides* of his mother and brothers it was impossible to entertain a doubt.

As to the mechanical difficulties of the case, they lie outside the purpose of the present paper. The boy was repeatedly seen to bring up from his throat—and once by my clinical clerk—large pieces of artery. Probably he had acquired the trick of partially swallowing objects—that is, of taking them into the gullet—and regurgitating them again. He evidently did not take them into the stomach, for he never vomited his food. Chinese jugglers, who swallow knives and disgorge them again, appear to possess this power in even greater degree than was acquired by this boy.

While admitting the undoubtedly hysterical affinities of these cases, it must not be forgotten that hysteria sometimes overlaps the confines of insanity; and that, in most large asylums, cases are found in which it is very difficult or impossible to draw a line of demarcation. It may indeed be truly said that an exaggerated desire to excite attention and sympathy is a sufficient motive for many of the slighter cases; but such an explanation is scarcely satisfactory in cases where pain and inconvenience, and even death itself, are encountered to keep up the imposition.

FEIGNED OR HYSTERICAL DISEASE OF SKIN.

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IN this JOURNAL for January 8th, 1870, Mr. Startin mentions some cases of feigned skin-diseases; and again in the number for February 12th, 1870, Dr. Hilton Fagge gives notes on similar cases. At the present time, when "feigned diseases" are engaging considerable attention, the following case may prove worthy of notice.

R. S., servant, aged 17, very tall, but well nourished (height, 5 ft. 9½ in.; weight, 10 st. 7 lb.), was admitted into the Royal Surrey County Hospital under Dr. Stedman on December 6th, 1869. She was well in health, except that the catamenia were irregular and the bowels costive. On each cheek was a bright scarlet blush; which, she said, was painful and tender. She had been laid up at her situation for five weeks with a similar rash coming out on various parts of the body, which had defied medical treatment. The blush on the cheeks continued for three days, when it gradually faded, and desquamation took place. Eight days after admission, an eruption resembling urticaria appeared on the outside of the left hip; and, two days later, a similar one on the back of the left hand and forearm, with three long marks as if caused by finger-nails; but she denied scratching her arm. It afterwards appeared, successively, on the front of the chest, on the inside of the left knee, the left arm, and again on the inside of the left knee. This last eruption was of a bright scarlet colour, and felt rough to the touch. A mustard-plaster of the same size as the eruption was applied to the right knee for three hours, and the next morning both rashes seemed exactly similar. She denied having caused it; but, during the remainder of her stay (ten days) in Hospital, no fresh rash appeared. A month after her discharge she continued well. In sweeping the chimney of the room in which she was laid up at her mistress's, a "pot with some old dried mixed mustard in it" was found lodged above the fire-place. The patient was kept some time in the Hospital in order that she might be closely watched, to detect, if possible, the agent with which she caused the rash, but nothing was found; yet, from the similarity of the rash on both knees—one caused by mustard-plaster, from the finding of the secreted mustard-pot, and from the erratic nature and various forms which the eruptions took, undoubtedly all were caused