LECTURE

ON

HYPOCHONDRIASIS.

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MISERY!—that is the subject of my lecture to-day. Perhaps you think you have had enough of that. The shadow of pain has been hanging like a gruesome cloud over the whole weary way through the systematic courses of medicine and surgery. But bodily pain is not misery; you must have seen patients jocose, or even cheerful, though daily racked with tortures, the sight of which has brought tears into your eyes. I would even go so far as to say that bodily pain does not cause misery in a normal man, at any rate, not misery at all comparable with that which arises independent of pain. Yet we lavish our pity upon the one, while we allow the other often to excite a feeling not far removed from anger in our breasts. Of course we sympathise with that of which, in minor degrees, we have all experience, while we (that is, the healthy-minded among us), fail to understand that of which our senses are not cognisant. Normally, the mere process of living is, of itself, a positive delight, a continuous delight, with comparatively short interruptions, arising from sickness and death; and the smile with which we greet everybody and everything is not taught by convention, but by instinct, or hereditary reason. Misery is abnormal; a disease, a terrible disease, as those who have felt it know well. It is a constitutional disease, idiopathic, not dependent on external circumstances for its origin. Disappointment, loss of wealth, loss of husband, wife, children, friends, of health, character, or social position, are often alleged as causes, and sometimes they may be the final excitant; but shrewd observation will show that usually they are mere pretexts, offered in explanation of a mystery. Thanks to the All-merciful, all these things are borne daily by millions with cheerfulness: "Some natural tears they drop, but wipe them soon," and involuntarily protracted sorrow is always a pathological state.

This state is called, in the nomenclature of the College of Physicians, "Hypochondriasis," and is rightly classed as a disease in which there is disorder of the sensitive parts of the nervous system, but no disorder of the intellect. For the patient feels all wrong, but understands all right. There is no perversion of the understanding, such as frees the insane from the responsibility of moral agency. The understanding, indeed, is usually very clear, so that it is easy, in the case of educated persons, to demonstrate to them the true nature of their malady, and to elicit evidence that it is idiopathic, and independent of, if not anterior to, the accidental causes assigned. I mean, it is easy to a persevering and earnest will.

The distinction drawn, as above mentioned, is of the highest importance to us as practitioners of general medicine, and to our patients; for while we are inclined, and I believe do right, to hand over those whose intellects are disordered for treatment by the special means which our alienists apply so skilfully, hypochondriacs are better kept in our own care. They are not *alienati mente*, and are injured by being treated as such.

Yet, though the College has acted well in drawing a distinct broad line between hypochondriasis and disorder of the intellect, the nomenclature does not quite satisfy me in its definition. The disturbance of the bodily health is put so prominently forward, that the reader is led to expect to find it preceding the deranged feelings, whereas, in a great many cases, no such sequence of events can be shown. The pasty tongue, the difficulty of swallowing, the loss of appetite, the painful and slow digestion in the stomach, the flatulence in the bowels, the weak, languid circulation, the loss of adipose tissue, and in long cases the atrophy of heart, liver, pancreas, are consequences of the imperfect innervation.

The most vivid picture extant of an hypochondriac is contained in the autobiography entitled, *Grace Abounding Unto the Chief of Sinners*. It is a history of the feelings of "God's poor servant, John Bunyan," as he styles himself. The plain tale of his inward misery, from boyhood up to his imprisonment in Bedford Jail, explains many passages in his larger work, *The Pilgrim's Progress*, which do not accord with the

psychical experiences of healthy Christians. I refer especially to the Slough of Despond, the Man in the Iron Cage, the description of Doubting Castle, Mrs. Diffidence, and Giant Despair. He says, in words which naturally break into poetic rhythm, "I beheld the condition of the dog and toad, and counted the estate of everything that God had made far better than this dreadful state of mine." No healthy man ever felt like that; but to the hypochondriac, alone in creation, no past, no future, can be so bad as the present—*hora novissima, tempora pessima*.

One feature especially noteworthy is the suddenness of the attacks. Bunyan describes himself as arrested by one in the middle of a game of tip-cat, so that he left the cat he was about to strike on the ground. But on "returning desperately to his sport again," he felt his soul "possessed," as he words it, with despair of ever attaining happiness. The suddenness of invasion is most striking when the patient is in the company of others, as Bunyan was. He may be in the middle of an ordinary conversation, when a dark cloud seems to overshadow him, and henceforth all is gloom and unutterable misery. Perhaps, under such circumstances, the attention is diverted from minor degrees of disease, and is drawn towards it only when it has got to the worst; for, in solitude, a more gradual progression is often observable.

A vague alarm of impending evil very frequently accompanies the misery, and sometimes (as in Bunyan's case), it takes the concrete form of a dread of hell, and thoughts about devils. In dreams they assume a definite shape, and seem trying to draw the sufferer along with them. Sometimes there is a dread of death; but I think it is exceptional, and that when you find such a fear in a diseased degree, the case is likely to turn out one of ordinary insanity, delusions of the intellect supervening. More commonly death is looked forward to as a relief from misery, and would be considered not unwelcome. In such cases patients will sometimes commit suicide, not like madmen, in a sudden whim, or uncontrollable impulse, but in a deliberate manner. Indubitably, suicide would be much more common, but for the reason which Hamlet, the prince of hypochondriacs, rightly assigns. "The dread of something after death," acts as a powerful safeguard. I wish Shakespeare could have truthfully written "The hope of something after death," which is a much better reason for avoiding suicide; but such a feeling is inconsistent with the character he is painting. While the fit is on, the only motive influence over the soul is fear, and that, I believe, preserves many an one from self-destruction. It is a stupid and a blasphemous act to hurl back the Creator's best gift in his face, and it well deserves the disgrace and punishment which men attach to it. But irrational it is not, for the hypochondriac may with reason argue that he had rather be or do anything than "grunt and sweat under this weary life." Nay, more, if a man be so credulous as to think the grave the end of his being, and can imagine "this sensible, warm motion, to become a kneaded clod," it is difficult to answer his arguments for extinguishing himself. Suicide is a cure for hypochondriasis, as a cure the hypochondriac seeks it, with a full knowledge of the nature and bearings of the action, and therefore he should be held entirely responsible. To call the deed one of "temporary insanity," where there is no evidence of delusion, is pure effeminacy. Some sciolists have lately promulgated what may be called an "euthanasian" creed, advocating both suicide and murder. Yet mad they certainly are not, and are guilty of any consequences which may follow the paradoxical dogma which they are vain enough to print. They are shown up in *The Pilgrim's Progress* under the guise of a wicked old woman, Mrs. Diffidence, who suggests "knife, halter, and poison," as a cure for the pilgrim's doleful state. Hypochondriasis never disposes the patient to injure others. Without disorder of the intellect, evidence of which may be wormed out, homicidal tendencies do not appear, so that you have no right to lock the poor man up in a mad-house on the grounds of social policy.

Hypochondriasis sometimes appears very early in life. John Bunyan suffered from it when he was a mere child, and quite as much when he was a blackguard swearing tinker, as after his marriage and conversion. Oftener it comes on in manhood, rarely after the meridian of life. Its early supervision would be enough to show its hereditary nature, but you can almost always obtain individual proof of the same, as it is not made a family secret, like madness. Sometimes insanity, more often hysteria, may be traced in sundry of the kindred, but most frequently chronic invalidism, or something which puzzled the doctors but did not shorten life, is the form which the disease assumes in the domestic records.

The intellect of hypochondriacs is usually of a superior order. The author whose case I have quoted is an instance in point. Again, Shakespeare makes Hamlet a courtier, soldier, scholar, "the observed of all observers;" and Shakespeare is never wrong in such matters. The patients who come to us are often shrewd men of business, pushing inventors, judicious speculators, so long as the disease does not interfere

with their usefulness. If skaters, they are distinguished by cutting the most elaborately graceful figures; if sportsmen, they are dead-shots. I select these instances purposely, because sedentary and scholarly habits have been popularly associated with the disease; but I think the association arises from the accident that the higher intellects are naturally attracted to literature. I have not found hypochondriasis oftener preceded by excess of brain-work or of desk-work, than by athletic training.

A common symptom in hypochondriasis is a temporary loss of power in the voluntary muscles of a part, or more often of the whole body, *paresis subitanea*. The patient is coming up hill from the railway station to dine with a friend, when he suddenly finds himself unable to proceed. Bunyan makes Giant Despair lose the use of his hands at a most lucky moment for the pilgrims, just as he is rushing at them with a club. In my experience, the lower extremities are most affected, but still the paralysis is of the partial character indicated; the Giant is described as withdrawing quietly, and when the legs are seized, the patients can still crawl along. There is no loss of sensibility, not even giddiness. The patient can stand, but he cannot go. He does not fall, but from utter prostration and weariness he throws himself into the nearest resting-place; and there he will remain, if allowed, till the misery gradually passes away, or is relieved by the stimulus of food.

Bunyan parenthetically remarks, that these attacks of paresis came on when the sky was bright: "he sometimes, in sunshiny weather, fell into fits:" a very shrewd observation, and one not likely to occur to any but either an actual sufferer, or to the sensitive penetration which always makes real genius hit the bull's eye of fact. Listen to Shakespeare's hypochondriac. "I have of late (but wherefore I know not), lost all my mirth, foregone all custom of exercises: and indeed, it goes so heavily with my disposition, that this goodly frame, the earth, seems to me a sterile promontory; this most excellent canopy, the air, look you—this brave o'ershining firmament—this majestical roof fretted with golden fire, why it appears no other thing to me than a foul and pestilent congregation of vapours," says Hamlet, pointing out of window to a bright starry sky. A common-place artist would have put in a background of mist and lowering clouds; but our poets know better, and rightly describe a high state of barometer as an aggravating condition.

It is very seldom that an hypochondriac escapes without the general misery being localised in pain of some part or another, either continuously or at irregular periods. An observant person can usually detect the nature of the pain by noticing that it is not antecedent to, but consequent on the mental distress. Bunyan says, "I felt such a clogging and heat at my stomach, by reason of this my terror, that I was, especially at some times, as if my breast-bone would have split asunder." This is the pain in the hypochondria, whence the disease gets its name. The "clogging and heat" is very graphic; the sharpness, the stabbing, the aching characteristic of neuralgia, are not found here, but instead, a dull sort of burning sensation, deeply seated in the interior of the body. It moves about, but slowly, and when it begins to move is usually moving off. Sometimes, what the patient calls a "scratching," or a "scraping," and which pathologists Latinise into "formication,"* is felt more superficially than the deep burning. The back of the head and neck, the soles of the feet, the palms of the hands, are favourite points for this sensation; but some also describe it as occurring in the abdomen. A feeling of weight in the rectum, in the uterus, or in the bladder, is often experienced, though they may be all no fuller than natural.

The *paresis subitanea*, which I described in the muscles of the limbs, still more frequently affects the involuntary fibres of the intestinal canal. The peristaltic movements become sluggish, and do not press upon the contents of the bowels. The portal veins fail to re-absorb the air thrown into the area of the tube, and so it becomes rapidly distended. If the air pass off, it is evident, from its odour, that it does not consist of the gases of decomposition, but is mostly atmospheric and carbonic, exhaled from the blood. But the air rarely does pass off by the external vents; it gives a great deal of trouble by remaining in the bowels, distending them inconveniently and painfully. Poor John Bunyan seems to have been so blown up, that he says he feared he was going to suffer the fate of Judas Iscariot, and "burst asunder in the midst." In process of time the whole may be re-absorbed, without necessitating any explosion.

If the paresis of the bowels be long continued or frequently repeated, it retards digestion, and the food decomposes and fills the abdomen

with foetid gurgling gases; there are a nauseous taste in the mouth, eructation, and malodorous flatus. But these cases are by no means so much the rule as to make indigestion an essential feature of hypochondriasis. When the flatulence is most marked, there is often much confusion and giddiness of head.

A feature which is almost universal in long cases of hypochondriasis, is loss of weight during the attacks. I am not sure whether it precedes or follows their commencement; but at all events it disappears very rapidly immediately on a normal condition of feeling being recovered, in such a marked way as that the patient considers the change a cause of restored health. In his *Grace Abounding*, Bunyan describes himself several times as suffering from this symptom—as he words it, "inclining to a consumption, wherewith, about the spring, I was suddenly and violently seized with much weakness in my outward man". And a few pages afterwards he speaks of being "very ill and weak", presumably from a similar cause, when his spirits suddenly revived, and he thought of the angels carrying Lazarus into Abraham's bosom. Then he mused with comfort on "O grave, where is thy victory". "At this", he goes on, "I became well both in body and mind at once, for my sickness did presently vanish". He typifies this symptom in the person of one of the prisoners in Doubting Castle, "Mr. Despondency, who was almost starved to death".

The male genital functions are frequently much deranged in hypochondriasis. Their condition may be described as exhibiting a want of harmony. There is at one time desire without erection, and at another time erection without desire, and sometimes emission without either. This distresses patients very much, for it affects, or is supposed to affect, their social relations to others, and it often leads them to submit themselves to injurious local treatment at the hands of dishonest and ignorant practitioners.

The urine of hypochondriacs is apt to be deficient in due acidity, and variable in specific gravity. Crystals of oxalate of lime often float in it, and an abnormal quantity of renal and vesical epithelium. Mucus also often is formed in excess in the urethra, and is squeezed out during straining at stool, or even stains the linen. These symptoms are all exhibitions of imperfect nutrition, and are analogous to the leucorrhœa of the female. I have, however, known the urine to contain an unusual amount of urea; and then I have found that the patients have been gorging themselves with meat in excess of appetite, sometimes from gluttony, sometimes on theoretical grounds.

The impression that they are the victims of some organic lesion is the well known commonest, and often called the distinctive, feature of hypochondriacs. Feeling general misery, often accompanied by local pain, they construct a theory to account for the same; and, as they are for the most part intelligent and ingenious persons, the theory runs a chance of being a very plausible one, and of convincing themselves and their friends, and often their medical advisers. They have been led into a wrong judgment, doubtless, but so have the doctors; but there is a most distinct broad line to be drawn between an error of this kind and one that is the result of hallucination, illusion, or delusion. The common sense of mankind is, as Dr. Maudsley points out (Reynolds's *System of Medicine*, vol. i, p. 20), the final court of appeal for what constitutes evidence of insanity; and you will find that the impressions of hypochondriacs regarding their bodily health are not repugnant to the common sense of mankind. This is an all-important test, for we often have people coming to us and complaining of things which are utterly preposterous—the mere statement of which is a proof of their non-existence. I refer to such a statement as that made to me by a tradesman's wife, that she had become solid, and that there was no space to contain the food, which nevertheless she ate; or that of a banker, that his abdomen was full of tadpoles; or that of an idle country gentleman, that some stones, which had been thrown in his face weeks ago, had gone down into the stomach and could be heard rattling. All these turned out lunatics in the end, and so, I feel sure, must almost all those laughable but misplaced examples with which writers on hypochondriasis are wont to enliven their treatises. Of course instances occur where the diagnosis is difficult; but they are really rare, and the moral of them is, let us not be in too great a hurry to make the diagnosis.

One usually employs the masculine article in speaking of hypochondriacs, but women are not wholly exempt. I have now a mother and daughter under my care for the disease, the nature of which they thoroughly understand, and are learning to subdue. Their intellects are of a superior order, and perhaps what one would call masculine in a favourable sense; I mean, they are not the least emotional or hysterical. It may be noted that Bunyan places one, and only one, woman in Despair's dungeons. Her he does not describe; because, indeed, he knew nothing of the other sex "but by their apparel" beyond his own family circle. He says he was "shy of women". "The common salutation of women I abhor; 'tis odious to me in whomsoever I see it. Their

* "Formication" means properly pain like that caused by the bites of ants, such as arises in the action of cantharides on the skin. I do not think that it describes well the sensation in hypochondriasis. I have always found sufferers repudiate the comparison of their feelings to the bites of ants or the stinging of a blister. For obvious reasons, I never use the word *formication* in their presence.

company alone I cannot away with." So he naturally did not receive their confidences.

It is a great comfort that hypochondriacs rarely if ever have that love of lying which angers us so much in hysterics. It is true that Hamlet shams madness; but that is for a definite politic object, as anybody else might sham, and not for the purpose of deceiving, like a hysterical girl. Now, hypochondriacs will argue with you interminably, but they will not swindle you; neither have they that unamiable suspiciousness of madmen: indeed, they are usually confiding patients. A few years ago, the wife of a hydropathist, who did not believe in her husband, said to me that she was obliged to return home, because the house was full of "the lunatics", meaning their patients. I said it was a wrong word to use—not only because it is stupid to revile one's bread and butter, but because lunatics are too suspicious to be profitable pigeons, and that her nest was more likely to be feathered by faithful hypochondriacs.

The corporeal symptoms so closely resemble those which are produced by excessive exertion, that I should conjecture the pathology of the two states must be the same—namely, a drain upon the voluntary nerve-force beyond the supply. In health, this arises from a temporary and intentional excess of the drain; in the disease, it arises from deficient supply. The part in which changes recognisable by the anatomist would be found, would be the grey matter of the nervous centres probably; but the anatomist never gets a change, for hypochondriacs are usually cured of their life-borne misery by the supervention of the lesions, which finally prove fatal, and which are generally quite unexpected; or, haply, they are carried off by some acute disease, as Bunyan was by an ardent fever caught in riding from London to Reading and back in stormy weather, on the errand of reconciling a prodigal son to his father.

The only anatomical lesion I know of which produces hypochondriasis is of the rectum, in the shape of piles or ulceration; and it is by no means common. However, it is certain that the nervous condition may be cured by curing the local.

The best general treatment is that which is the most rational deduction from the pathology. It may be divided into *physical* and *moral*; and we will consider the physical first, because it is the easiest prescribed. The point of prime importance is the due nutrition of the nerve-substance, and that is effected by keeping up in the body a treasury of freshly renewed adipose tissue. In two instances since Christmas, I have had the remark made by patients that an increase in weight was coincident with a renewal of healthy thought and feelings. This store of adipose tissue, as a basis for the molecular growth of nervous matter, may be accumulated by leading up to the acme of cod-liver oil, through the ladder of Devonshire cream, bacon, olive oil, pancreatic emulsion, marrow pudding, or any other oleaginous substance which may be invented for educating the gustatory nerves to bear our fishy friend. At the same time, it is desirable to bring the digestive functions into good working order by means of strychnia and henbane, *secundum artem*. Some persons will not grow fat without a large amount of bodily rest; and it is necessary to enforce it upon them by medical prescription. I have found fidgets more often interfere with the cure of hypochondriacs than laziness. Even the most untoward accompaniments will sometimes not diminish the value of rest. The being shut up as a Nonconformist for twelve years in Bedford Jail seems to have cured John Bunyan, though it was a filthy and noisome "den", as he justly terms it. He says: "I never knew what it was for God to stand by me at all times, as I have found him since I came in hither"; and confesses that he passed his time there "in much content". It was at this period he was lighthearted enough to compose the characteristic and descriptive anagram of his name, John Bunyan, "Nu hony in a B." Indeed, he is a bee full of new honey. Nor does it seem that he relapsed afterwards. The fact is, that he was well fed up by admiring friends, and entered on his true vocation of writing the life-dramas which enshrine him in our hearts along with Homer and Shakespeare and "George Elliot".

I have been the more particular in alluding to the importance of rest, because all non-professional and some professional authorities exalt the opposite course—namely, bodily exertion, as a panacea for hypochondriasis; but it certainly does not answer. Beguiled by these theorists some years ago, I put them to the test. Corresponding with a hypochondriac, whom I had not seen, in the North of Scotland, I told him I would give him no more advice unless he walked fair heel and toe all the way to London. In a few weeks he presented himself, having conscientiously obeyed my prescription; but, I am sorry to say, he was decidedly the worse for it, and, as may be imagined, not grateful.

But the excess of rest is apt to produce constipation; and if the strychnia and oil be not sufficient to obviate that, an habitual aid must

be given to the peristaltic movement, and to the liquefaction of the fæces by green vegetables, salads, or even by such drugs as taraxacum, or Seltzer water taken as a regular diet. Powerful or occasional purgatives are injurious. I have found a very small dose of belladonna—say one-eighth of a grain of the extract at most—combined with half a grain of aloes, serve the turn very well. What is wanted is, not a free action of the bowels—for moderate sluggishness is normal—but a prevention of obstruction.

In the moral treatment of hypochondriasis, Bunyan is an excellent guide. You remember how, when Christian and Hopeful were in the dungeon, in doleful case indeed, the former suddenly bethought him that he had a key in his bosom called "Promise", with which he picked one after another the locks that lay between them and liberty. "And so they went up to the mountains, to behold the gardens, and orchards, and fountains of water, where also they drank and washed themselves, and did eat freely of the vineyards." There is no key equal to it; it is somewhere in every body's pockets; but the prisoner must find it himself, and the medical adviser seldom has an opportunity of helping him. Nevertheless, I trust that no sufferer will come across such miserable comforters as our poor hero. He tells us, in *Grace Abounding*, "I took an opportunity to break my mind to an ancient Christian" (I should call him an old Job's wife), "and told him all my case. I told him also that I was afraid I had sinned the sin against the Holy Ghost; and he told me he thought so too." It is all very well to agree with a maniac's whims, but a hypochondriac may claim a right to be reasoned with, and John Bunyan was badly used.

Several other hints equally suggestive may be found in the *Pilgrim's Progress*. Though the pilgrims managed to escape the Giant was not destroyed, but afterwards fell under the swords of Mr. Greatheart, Mr. Dare-not-lie, and their companions. In fighting to make others happy, the suffering soul is drawn out of itself, and conquers its own foes. You may do much by interesting hypochondriacs in thoughtful works of charity, and by leading them to ornament life with beauty and pleasure. They must hate ugliness in any shape, not for their own sake, but for that of others.

Bunyan feels very clearly the antagonism between hypochondriasis and the æsthetic life. Puritan though he is to the backbone—fanatic, nonconformist, martyr, satirist, woman-hater, a foiled reformer, at war with the age, and getting the worst of it—yet he had the true poet's sympathy with all that is human; and he celebrates the dinging-down of Doubting Castle in a fashion that his sour-faced coreligionists would have denounced as

"idolatrous and pagan,
No less than worshiping of Dagon."

For "Christiana, if need was, could play upon the viol; and her daughter Mercy on the lute. So, since they were so merry disposed, she played them a lesson; and Ready-to-halt would dance. So he took Despondency's daughter, Much-afraid, by the hand; and to dancing they went in the road. True, he could not dance without one crutch in his hand; but I promise you he footed it well: also the girl was to be commended, for she answered the music handsomely."

What is Ready-to-halt's "crutch," which he could not lay aside? The author leaves us to interpret it, each according to his own experience; and for me it shall be the medical treatment, which cannot safely be laid aside, even when the disease appears subdued by the moral. One crutch—that is, half-doses—may be sufficient; but the patient should be warned that his disease is constitutional, and that he is liable to relapses. When Ready-to-halt went over the dark river, he bequeathed his crutches to his son; and I hope they have been of use to him.

I am always very unwilling for a patient to give up his regular occupation; for this brings him into social relations with others, and he may think of them instead of himself. Doubtless, worrying hard work may be a severe trial, and be bad for him; but idleness is much worse. It was by going out of their way, and falling asleep, that the pilgrims fell into the clutches of Giant Despair. I have had as patients two of our professional brethren, confirmed hypochondriacs, who were perfectly well and happy so long as they were engaged in that most trying of all lives, the charge of lunatics—the one in a private capacity, and the other as assistant in an asylum. When unemployed, their misery was frightful.

With respect to the palliative treatment of the pains in hypochondriasis, I must earnestly entreat you not to give opiates. An increased dose is demanded with alarming rapidity; and, when you have once begun, there is no stopping. With opiates I include alcohol. The only admissible cases for the employment of this class of drugs are those where there is an actual deficiency of sleep, confirmed by independent evidence. But the sedative that is chosen must be given in very small doses, and, above all, must not be increased.