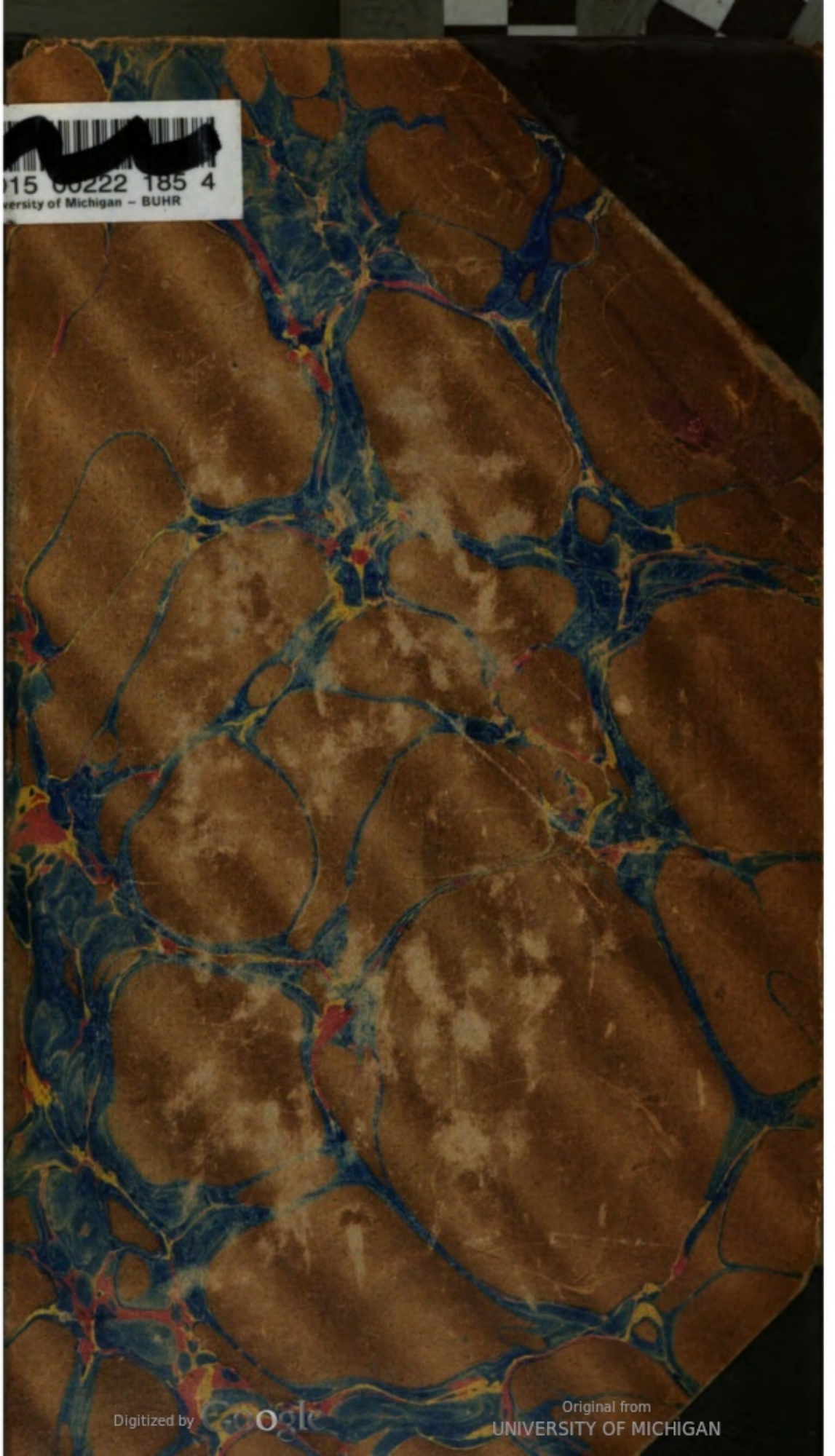
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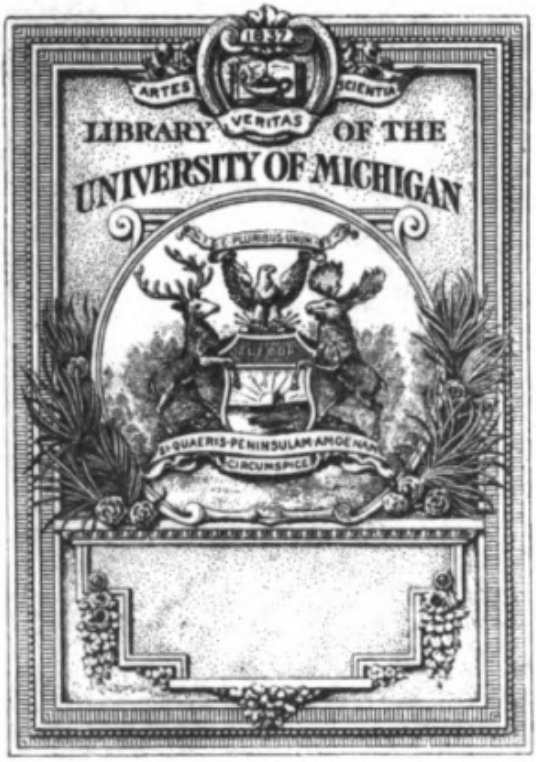

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"Quantam ego quidem video motus morbosi fere omnes a motibus in systemate nervorum ita pendent ut morbi fere omnes quodammodo Nervosi dici queant."—CULLEN'S NOSOLOGY: BOOK II, P. 181—EDINBURG, ED. 1780.

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VOLUME XXIII.

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THE
ALIENIST AND NEUROLOGIST.

VOL. XXIII. ST. LOUIS, JANUARY, 1902. No. 1.

THE ACQUIREMENT OF NERVOUS HEALTH.*

By F. SAVARY PEARCE, M.D.,

PHILADELPHIA, PENNSYLVANIA.

Professor of Nervous and Mental Diseases in the Medico-Chirurgical College of Philadelphia.

GENTLEMEN:—A somewhat paradoxical title you may say I have chosen upon which to address you. This is true, but in the chess game of life paradoxes do come and even figurative English at command will not quite permit a visitor with you today to use better terms to describe the full meaning of this broad subject under discussion.

We should like to contrast the traditional three B's—brains, brawn and belly—against the three W's—wine, women and worry—as complementary trios of the state of nervous health of people, but 'tis too old, yet an unheeded story. I am not desiring to go further today than toward a study therefore in pathogenesis of nervous diseases. That some potent sources of the acquired nervousness so frequently seen in American life does exist, all will admit. What a pitiable sight to behold, since too prevention is at hand. The evil predisposing causes can and should be

*Read before the twenty-seventh annual meeting of the Mississippi Valley Medical Association at Put-in-Bay Sept. 13, 1901, and the semi-annual meeting of the District Medical Society, Cumberland County, N. J., October 8, 1901.

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largely eradicated. We are to advise then ways to prevent people and individuals from becoming liable to and to actually suffer functional nervous diseases, people on the verge of nervous break-down; or those who, by abusing certain privileges in living, shall surely bring on a collapse in due time. Here alone can we withdraw the moat.

It is more frequently in those who are not the subjects of a nervous heredity too that I call your attention toward in advising for wider prophylaxis in medicine, especially in nervous and mental disease. It is this class of business man or woman, for example, who has no warning of his doom; for, as Dr. Weir Mitchell has ably set it down, the nervous system's "wear and tear" is not felt as pain which is the dominating guide to the average man for his assuming self to be ill.

The less learned laborer does differently. He seeks rest from the comfortable tire of his muscles and hence seldom collapses. Would it were that we could assign his intellect a place in the apparently more conservative plan of life he pursues; but alas, 'tis but nature's force for the healing balm to assert itself—sleep. Recapitulation and assurance of success in bringing about nervous health in persons of nervous temperament impels me to go on more in detail. I have had no more grateful patients than those who had been guided away from that baneful state of health, "general nervousness."

SIGNS OF INSIDIOUS NERVOUS COLLAPSE.

Loss of memory and lack of concentration in a banker or professional man is of serious import and should be the sign-board to warn him from the precipice down which he will surely fall with a crash, more or less severe to his nervous health. And, in my experience, let a man past forty years insult his nervous system to such degree as to become a typical neurasthenic and such a one can never quite recover. Health ever after becomes a delusion and a snare. He will work in starts, but continuity of labor I have never found for days at a time in such people, even though no somatic signs present. Depending also upon the

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condition of the gastro-intestinal tract, governed by the sympathetic system, we will have symptoms in warning of a nervous break-down which the patient or every physician perhaps will judge as a transient "wind dyspepsia;" but which to the trained physician will be a signal warning of serious auto-intoxication, for, as a sequella, mal-nutrition of the central nervous system occurs. Indeed the sympathetic asthenia thus prevailing means, of course, loss of control of the great involuntary functions of the human body, especially of metabolism so vital to nervous health. Then circulatory disturbances, brought about by overwork of the sympathetic system, add another masked evil by lessening the proper blood supply to the several cerebro-spinal nervous centres, and at once the pathogenesis of neurasthenia or other serious maladies is surely established. It may be a hysteria, that disorder of the emotion which is recognized so frequently, but the further study of its cause and hence detail treatment of which is so frequently neglected; the loss of confidence the patient has in his doctor being in the great majority of such cases undoubtedly due to the lack of fullest understanding of the case, written so forcefully, though subconsciously, upon the physiognomy of the physician.

Here it is in place to mention the value of a recent work, "Unconscious Mind," by Dr. Schofield of England, which elucidates the pith of this influence of mind over matter in a practical way. That favorable metabolic changes can accrue from a bright mental state, I have seen in not a few cases of melancholia where persistent efforts, as in conversation and music for the sufferer, was a winning card to cure. An intelligent nurse or attendant is a *sine qua non* for success here.

There are two classes of acquired nervousness which should be judged from a civic or social point of view rather than from the medical aspect: A—Cases due to inevitable causes, such as worry over calamities in a family; and B—Cases following absolutely preventable causes, such as worry over occurrences of every day life which the high-strung American takes on almost with a studied effort.

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There are distinct cases coming under both of these headings which must be carefully selected before the physician can hope for anything like success in the prevention of nervous and mental disease of the insidious types to which we are confining the paper.

I shall now endeavor to bring out the salient points in cases to be recited where the advice given, being weighed and carried out by the sufferer thus instilled to hopefulness, wherein the suppression of dire results were pretty positively avoided.

Case 1: Mrs. B., aet 40, always a healthy woman, in the better walks of life, who brought up a family with due indulgence, as a mother, and as a finale, sought the happiness of her daughters, naturally enough, through marriage. In this she had been successful, save in the case of the eldest daughter who was married with great *eclat* to a man whom the mother, with a sudden shock, discovered was a dipsomaniac and the daughter was doomed to a life of mortification to say the least, in which the mother, our patient, shared ten-fold, and a melancholia followed which medicaments, change of scene, and the whole gamut of desirable methods of treatment, I am sure, will never quite overcome. The above case, which need not be detailed further, is an example of the "inevitable abortion" of endeavor to cure, so well phrased by our obstetrical confrerres. On the other hand, I would feel certain of prompt recovery in this woman if the mental depression could be wiped away by regeneration of the son. Loss of her mental health will constantly be the fruit from such seed. The mind alone dominates this case.

Case 2: Miss Y., aet 30, a subject of hystero-neurasthenia of distinctly acquired type, due to the same baneful influence—an alcoholic brother. The patient has been completely restored to health since the abandonment of dissipation by the brother to whom she was entirely devoted. My efforts were to create a cheerful frame of mind through rest-cure and fattening. The brother did the *real* cure.

Case 3: Miss R., *aet.* 34, a woman in perfect physical

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health and without any heredity as to nervous disease whatever, through a life of lack of the initiative, and in which endeavor was never considered essential, at the age mentioned came to a mental status pitiable to observe, in which there was no interest in life and in which she felt there was physical breakdown dominating her state, from the extreme weakness on exertion, and palpitation of the heart, etc. The usual methods of the general practitioner, who did not attend the mental aspect, failed. Finally charlatanism was resorted to, with the result of greater complications in the case. With the careful elimination of organic trouble by a thorough examination, the patient was impressed with our statement that no physical disability existed. The plain advice of regulation of life with definite duties of an intellectual and physical nature, such as light reading, rowing and calisthenics, have acted as sheet anchors for beginning a cure which seems will ultimately come.

Case 4: Dr. K. is an example of that general nervousness coming on at the age of 30 years in a man of athletic tendencies and good physique. He was a track runner of distinction in college days. From lack of proper proportion in his mental and physical work after graduation he became the subject of general nervousness—fidgetiveness well expressing the motor excitability, while persistent disturbances of circulation was manifest by leaky skin and coldness of the extremities, while vertigo of distinct objective type harassed him much in locomotion, but when an attack was forewarned, lying down would give relief by restoring the proper flow of blood to the central nervous system.

Here was a case that by exclusion we decided was neurasthenic largely or an active (muscular) type. The man is of extreme intelligence and carried out our detailed advice—the one in a thousand.

By cutting down tobacco to almost nil, slowing down his extreme muscular activity by which he was using up his nerve energy too rapidly, horseback riding and simple feeding, with regulation of hours of sleep to eight in twen-

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ty-four, the physician is growing back to nervous health as rapidly as common sense methods will allow.

The opposite is shown in the following:

Case 5: W. B. H., aet 22, a young man of brains, a literary genius, and of but average physique, came to me a year ago suffering from headache, general restlessness of dream states and a lassitude out of proportion to the cause for it. His eyes and all other organs were normal. The patient had no vicious habits. Since elimination proved this acquired irritability of the central nervous system to be due to lack of physical build and exercise largely. Walking a half hour daily in the open air, light calisthenics, a free supply of proteid food stuffs and hot bathing to favor circulation in the skin, has wonderfully improved the man.

What fully promised to be a nervous wreck twelve months ago, is now, to use his words, "calm and composed." It is, with no exaggeration, a very important event that this young person is saved to do a great work in literature. The case has well repaid me in this thought alone; my best fee. The riddles of the nervous system are legion, but many can be solved, and scientifically.

Case 6: I shall make a final word in briefly reporting the case of A. B., aet 19 years, seen in the practice of Dr. E. Pearce of Steubenville, Ohio, August 20th, 1901.

Miss B. had evidently dreamed of burglars being in the house. She came to her father at night perfectly mute and making signs of her fright by the marauders. She had no convulsion and seemed quite composed in every way the next day when there was found nothing wrong with the vocal or other organs. There was no motor palsy anywhere but there did exist a segmental anaesthesia of both arms to shoulders. At the end of a week the patient suddenly began to talk and in a few days speech became normal and the loss of sensation disappeared entirely.

It was proven that no burglars were in the house, but some of the girl's garments were seen out of the window through which she persisted they had descended to the ground. The girl was truthful.

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This case probably represents one of unconscious mental impression, as to the fact of a dream auto-suggestion for her throwing the clothing out of the window, and for the suggestion likewise of her aphasia, due, as she persisted, to one of the men having slid a rod down her throat and stating she "could not talk."

I have never seen such a case before, but it is valuable to force the conclusion of conscious and unconscious mind action, a point much disputed in recent years by psychologists who could add much to their armamentarium of scientific facts by the advantage of practical studies at the bedside.

The point that brings this case into place in this contribution is that this woman should be guarded against becoming a confirmed hysterical invalid by proper explanation of the case and thus clearing up the psychology of a rare condition spent on our patient.

Conclusions: Many nervous and mental diseases have perverted function as a basis for development. The mental aspect must be recognized. Recognizing *pathogenesis* in this light and seeking *early signs* which are not now given sufficient attention by the profession (such as irritability of the motor and sensory nervous system—lassitude, forgetfulness, etc., in a person of intelligence who tells you in the history that such changes in his life do occur) we can hope by this scientific borderland study to tend for regeneration of many people who will ultimately go into some of the graver organic system diseases, when it can not be truly said, "it is never too late to mend," to use words of the accurate novelist, Charles Reade.

Short vacations, a trip on your beautiful lakes, or the quieting ocean voyage, canoeing, horseback riding, overfeeding with milk and plain wholesome foods, good company to aid digestion scientifically, if you please, music, bowling, golf, etc., all selected for the case in hand by careful somatic and mental study, will avail much in preventing general nervousness, the borderland of perhaps irreparable

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nervous and mental disease; and that nervous health can be thus acquired in those who do not know (but would wish to if they could learn its value) by carrying out such advise given in the paper.

A final word of appeal is made to you, gentlemen, to disseminate these practical facts among the laity.

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MANUAL STIGMATA OF DEGENERATION.

By J. ELVIN COURTNEY, M. D.,

DENVER, COLORADO.

OF the numerous stigmata which strike the eye of the trained observer, few are of more value than the congenital imperfections and malformations of the human hand, so visible and palpable is this member and so naturally does it fall under the examination and observation of the expert. These marks are of especial value in the absence of other and grosser signs, such as cleft palate, asymmetry of the cranium, and so forth. While it is not argued that all of the even notable defects of development of the hand portend serious psychical degeneracy, there are several of these defects seen often enough to attract attention and impress the observer that they belong to persons with certain more or less pronounced mental obliquities, or predisposition thereto, and are to be seriously considered in forming opinions of the mental qualities of the individuals. In the prognosis in mental and nervous troubles and in predicting permanency of recovery from such affections the presence of these stigmata are decidedly unfavorable. The same applies to persons of the delinquent and reformatory class. The following are the most frequent and significant manual stigmata: Stub-thumb or abbreviation and clubbing of the last phalanx of the thumb; spur-little finger or marked shortening of the little finger, with or without deflection downward of the lost phalanx (better seen in X-ray photographs) and infantile nails, the nails being small, short, thin and disposed to flare and curl at the edges. Persons presenting these stigmata need not necessarily be delinquent nor defective, but are almost certainly

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of neurotic temperament and liable to hypochondria, hysteria and to become the victims of morphine or alcohol.

The evolution to mechanical perfection of the thumb seems especially to have marked the ascent of man to that manual as well as mental supremacy which he holds over other animals. His nearest relative, the anthropoid ape, has a very indifferent thumb. And in man the abbreviation and stubbing of this member implies a stigma at least, of physical and psychical reversion to a lower type. In a number of measurements of the lost phalanx of the thumb when simply flexed at right angles to the joint above, the writer found average measurements 3.5 c.m. or about 1¾ inches for men and 3 c.m. or about 1⅜ inches for women in normal persons. A number of measurements of neurotics showed ½ c.m. or about ⅜ inch of shortening. The little fingers in which pronounced stigmata appeared came only about midway between the last joint of the ring finger and the joint above; whereas normally the tip of the little finger comes about flush with the last joint of the ring finger.

The lower hand in Figure 1 illustrates two of the conditions mentioned, abbreviation of the thumb and little finger; the hand above is that of a normal person. The subject of this photograph has suffered from attacks of mania for twelve years, enjoying more or less complete remissions of from four months to nearly two years. One woman with the thumb stigma was an habitue of morphine and liquor and led an immoral life. The peculiarity of the thumb had been noted by the patient who said that a sister had the same and evidently the stigma was hereditary; another person with the same mark had an insane and criminal father, and still another had an insane sister and was herself addicted to drink and perverted sexual feelings.

Figure 1.

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SEXUAL INVERSION AMONG PRIMITIVE RACES

By C. G. SELIGMANN,

M. R. C. S. ENG., L. R. C. P. LOND.

Superintendent of the Clinical Laboratory, St. Thomas' Hospital, London.

BUT few details of sexual inversion and perversion are known among savages, and it is commonly and tacitly assumed that abnormalities of the sexual instinct are the concomitants of Oriental luxury or advanced civilization. Too often merely the grosser forms of perversion have been looked for or noted, the condition described by Moll as psycho-sexual hermaphroditism, in which, while the psychical resemblance to the opposite sex colours the whole social life of the individual, there are also present traces of normal hetero-sexual instinct, being unrecognized or ignored. Among American Indians, from Alaska to Brazil, homosexual practices occur or occurred. Sodomy was prevalent among the Nahua (Aztec) and Maya nations* the latter tolerating if not systematizing its practice. Among savage races Bancroft, speaking of the Isthmian tribes of Cueba and Careba, says: "The caciques and some of the head men kept harems of youths who were dressed as women, did women's work about the house, and were exempt from war and its fatigues."‡ Again: "In the province of Tamaulipa there were public brothels where men enacted the part of women,"§ while the modern Omaha have a special name signifying hermaphrodite for the passive agent, whom they regard with contempt.‖ Among the Aleuts of Alaska

*Bancroft, *Native Races of the Pacific Coast*, vol. II, pp. 467, 677.

‡*Ibid*, vol. I, p. 774.

§*Ibid*, vol. I, p. 635.

‖Third Annual Report of the Bureau of Ethnology, p. 365, Washington, 1884.

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certain boys, whom Holmberg* states were selected for their girlish appearance, are brought up as girls and decorated as women. Similar instances might be multiplied, but, apart from the last mentioned, which, according to Havelock Ellis, suggests the possibility of congenital inversion, they are all examples of the grossest forms of perversion, and no details suggesting that any of these are cases of congenital inversion are given. Similarly there is reason to believe that the pæderasty practiced by certain New Caledonian warriors, which is stated to constitute a relationship more sacred than blood-brotherhood, is resorted to for convenience and perhaps for Malthusian reasons,† as it is among some Papuans of the western district of British New Guinea.‡

A somewhat different condition of things prevails among the Tupi, a Brazilian tribe in a low stage of civilization to whom Lomonaco‖ has devoted considerable attention. While noting that sodomy was prevalent in almost every local tribe, and that a class of men were met with whose function it was to lend themselves to the practice, he states that among the Tupi many women took no husbands, devoting themselves for the whole of their lives to perpetual chastity, and quotes Gandavo§ to the effect that there are some women among those who decide to be chaste who will not consent to know men even under threats of death. They wear their hair cut in the same fashion as the males, go to war with their bows and arrows, and take part in the chase. They frequent the company of men and each one of them has a woman who waits on her, to whom she says she is married and "with whom she communicates and converses like man and wife." It seems probable that here, among a people addicted to sodomy and in whom here is no strong feeling against homo-sexual relations,

*Quoted by Havelock Ellis and J. A. Symonds in Das Kontrare Geschlechtsgefühl, Leipsic, 1896.

†Foley: Bulletins de la Societe d'Anthropologie de Paris, 1879.

‡Beardmore, Journal of the Anthropological Institute, vol. xix, 1890.

‖Sulle Razze Indigene del Brasile, Archivio per l'Antropologia e la Etnologia, 1889 Florence.

§Historia da Provincia de Santa Cruz, quoted by Lomonaco, *loc. cit.*

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there is an element of true congenital inversion similar to that present in the sporadic cases among Papuans to be immediately described.

While with the Cambridge Anthropological Expedition to Torres Straits and New Guinea several instances were met with in the Rigo district of British New Guinea where, unlike the Fly river district, the habitual practice of pæderasty is unknown.* These cases occurred among a people practically still in their stone age and so uncontaminated by external influences that even white men's diseases had not yet obtained a footing among them. In the following notes the condition of the genitals is given on what is probably good authority, but in no case would it have been politic to have attempted to verify my informants' descriptions by actual examination. Three of the four cases alluded to were inhabitants of Bulaa, a considerable settlement built for the most part on piles in the sea. One of these had been dead for some time. In her, assuming the native diagnosis of sex to have been correct, there was maldevelopment of the genitalia, while the remaining two Bulaa cases are probably pure instances of psycho-sexual hermaphroditism.

Hiro, a female aged about 30 years, is a daughter of one of the most influential men of the tribe. She is rather taller and her figure is less rounded than that of the average Bulaa women. The skin over her breasts is somewhat wrinkled, but apparently the glands themselves are normally developed. Her thighs and buttocks are tattooed in the usual female manner and her genitals are said to be normal and the mons hairy. As to previous history, as a little girl she preferred playing boys' games which by all accounts she played remarkably well; as she got older she still preferred boys as companions and avoided her own sex. For a long time she resolutely refused to adopt the usual girl's petticoat and at puberty was only compelled by threats to do so. For the next two years her conduct was not remarkable. Menstruation, which was said to be neither

*Cf. Beardmore, *loc. cit.*

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irregular nor scanty, occurred and has since been normal in character. At about the age of 16 years she aborted; since then she has lived with her mother and has refused at least three offers of marriage. As far as can be ascertained she has never had a lover of her own sex and since the abortion has lived a solitary life or has at least carried on no intrigue of sufficient duration to arrest public attention. She is said to be more intelligent than the average woman and carries weights man-fashion on her shoulders instead of by a band round her forehead as other women do. In the garden she uses the heavy digging stick (*kai*) for turning over the soil, which is essentially man's work, women, as a rule, only weeding, planting, and digging yams.

An instance of pseudo-hermaphroditism occurring two generations ago was well remembered and appreciated. The subject who, since she had connection in that capacity, was considered a woman, was said to have possessed both penis and vagina; there was some doubt as to whether she had testes. It was stated that she menstruated and passed urine *per vaginam* and that her breasts were small. She wore a modified petticoat, consisting of a short tuft in front and behind, and spent most of her time among the men of the tribe, with whom she took part in any hunting or fighting that was going on.

Gima, aged about 30 years, is a "chief" much trusted by the government and very intelligent. He is thoroughly masculine in appearance and active, plucky, and energetic. Having become a man of importance and a firm supporter of the Government he now wears a jacket and short trousers. It is, however, a matter of common tribal knowledge that his thighs and buttocks are tattooed in the elaborate fashion peculiar to women, without which no girl is considered marriageable. His genitals are said to be normal. He is said to have previously taken the passive part in sodomy soon after puberty, later he married, but had no children, and divorced his wife on the score of infidelity. He has since lived as a bachelor, it is stated to avoid women, and to have, at any rate till very recently, habitually taken the passive part.

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I am indebted to Mr. A. C. English, Government agent of the Rigo district, for notes of the following case, that of a man belonging to the Garia, an inland tribe which is gradually pressing down towards the coast from the foot-hills of the main range.

Unasé is aged about 50 years, unmarried, and is somewhat doubtfully stated to have abstained from intercourse since soon after puberty. His breasts are normally developed and there is hair on his chest; his genitals are normal and hairy; virile organ perhaps rather small; his voice is shrill. He habitually associates with women and accompanies them on their trading expeditions towards the coast, when he carries his "trade" slung by a band round his forehead as women do. He takes a woman's part in domestic and social life as well as in the work he does in the garden. In spite of this he has on one occasion joined a war party and bears on his back the tattoo marks which distinguish the successful homicide.

With these cases may be compared the following occurring in Sarawak among a people in the barbarous stage. At Sibu on the Rejang river, Budok, a Mahomedan Milanau,* probably suffering from elephantiasis, asked for medicine for swellings in both groins. He refused examination and it was noticed that he wore a veil† such as Malay women wear. His voice was soft, not shrill or treble; physically he was small-boned and of a somewhat delicate build, but not undersized, and on the whole masculine in appearance. He was said to have normal breasts and genitals, but not to care for intercourse, in place of which he took the passive role in sodomy. He sat with the women in the house and like them sewed and made clothes, baked cakes, and weeded the paddy fields. He wore women's clothes habitually and whenever possible.

*H. Laing Roth ("The Natives of Sarawak and British North Borneo," vol. I, p. 12) says: "The Milanaus are a quiet people, not Mahomedan, but dressing like the Malays and cultivating sago." Recently Mahomedanism has made considerable progress among them; there is, however, no reason to believe that it has led to or encouraged sexual perversion.

†Prostitutes at Kuching wore an exactly similar black veil.

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JUVENILE FEMALE DELINQUENTS.*

By E. S. TALBOT, M.D., D. D. S.

CHICAGO.

MARION DE LORME lived to be one hundred and thirty-five (from 1588 to 1723) so that the Parisians wishing to instance something which resisted the assaults of time cited her and the tower of Notre Dame. She buried four husbands and was over eighty before losing her freshness of mind or body. Ninon de L'énclos at eighty still had as glossy black hair as in youth, white teeth, bright eyes, full form and excited a violent passion in the Abbe de Chateauneuf a youth of twenty.

Many Greek courtesans were celebrated even in old age such as Plangone, Pinope, Gnatone, Phryne and Thais. Historians maintain that Thais died at seventy without ever having abandoned her profession. Plutarch relates that she pursued a young Thessalian with whom she was in love into the temple of Venus whereupon the women of the country killed her, angry at her audacity, and jealous of her charms. Phryne when old, had lost nothing of her beauty and she exacted large sums to the day of her death, wittily describing the practice as "selling the dregs of her wine dear."

The occasions which present themselves to draw the naturally normal woman into crime are, according to Lombroso, multiplied now by the higher education conceded to females but of which they can make no use by earning their bread in offices or professions. Many women of intelligence find themseves with nothing to show in return for

*Continued from ALIENIST AND NEUROLOGIST, October, 1901.

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much expense and labor. They are reduced to want while conscious of not deserving it. Being debarred from the probability of matrimony owing to the ordinary man's dislike to a well instructed woman they have no resource but in suicide, crime, or prostitution; the more chaste kill themselves, the others sell themselves or commit thefts. According to Mace, governesses are to be found in St. Lazare imprisoned for thefts of gloves, veils, umbrellas, pocket-handkerchiefs and other articles necessary for them to make a good appearance in school for whose purchase they cannot always earn enough. They have been driven to the offense consequently by the exigencies of their profession. The number of governesses who have no pupils is so great that a certificate, whether high or low class, becomes the case of suicide, of theft or prostitution.

For centuries, as J. G. Kiernan* remarks, while man was the hunter and warrior, woman was the farmer, tool-maker, carpenter, tailor, tanner, shoemaker and decorative artist. Every art of civilized nations originated with woman. When hunting and war ceased to be the chief male occupations man intruded on arts created by woman.

Evolution in biology (an advance from the indefinite homogeneous to the definite heterogeneous with the loss of explosive force,) consists in the creation of checks; these in man result in the creation of a secondary *ego*, the source of all morality. So far as the race is concerned, the creation of this secondary *ego* is most important in woman. Checks will not be created when woman is secure in the "home," gynaseum or harem from evil. Society, as Voltaire remarks, is created by women. The nations which seclude women are unsociable. Seclusion hence destroys individuality, the source of ethical advance.

The question arises whether, as seems indicated, the increase of other criminality at the expense of prostitution be not an expression of advance. In a certain sense, as even Havelock Ellis admits, this is true. Lombroso has crudely recognized the same fact. While in primitive conditions prostitution in the modern sense was exceptional since the

*Alienist and Neurologist, 1895.

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woman for religious reasons or at the demand of her husband and relatives, gave herself for hire, still there was much sexual laxity consistent with tribal ethics which were not of those of civilization. Primitive man became criminal in civilization not from its degrading influence but because he was judged by new standards. Under such conditions crime would take the line of least resistance in the weak. Hence what women had formerly done for religion or at parental or family dictation, they would do for their own advantage. Under Greek civilization, the only career for cultured women was, prior to the time of Pericles, that opened by prostitution, whence came the Hetarai. To a certain extent conditions of primitive life foster the employment of sexual weapons by women as a means of securing power or even life. This condition however, while the germ of civilized prostitution, had not its abject features since the women that adopted it were rather above than below the then existing ethical standards. Under primitive and even under comparatively high Aryan and Semitic standards, woman was the property of man. Prostitution lost its immoral nature when commanded by the husband or father who had the right to dispose of his property as he would. Woman under such conditions, was guilty not of prostitution, when she gave herself either in marriage or without sexually for purposes of gain, but of theft.*

In analyzing the inter-relation of prostitution and criminality these facts must be taken into consideration.

The view that criminality was an advance on prostitution is borne out by the valuable researches of Pauline Tarnowsky† on the Russian prostitutes and female thieves. After careful analysis of the data obtained she expresses the opinion that: "Professional prostitutes are incomplete beings affected by arrest of development generally due to morbid heredity and present mental and physical signs of degeneracy in accord with their imperfect evolution. Female thieves are less tainted with heredity than prostitutes and have fewer signs of degeneracy. The intellectual and moral

*Letourneau *Evolution of Marriage.*
†Etudes Anthropometriques sur les Voleuses et Prostitutes.

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level of the female thief exceeds that of the prostitute. She has more self-respect, more intelligence, is more energetic and struggles better in the contest for existence. She is less lazy and more given to work which she does not fear. However incorrigible be the professional thief and however numerous her crimes,she cannot commit and repeat them every hour of the day, it being assumed that these and prostitution are equally vicious unities. The thief sins but by intervals while the prostitute in a house sells her body without relaxation, accepts her abject trade agreeably and does not want to change it. Laziness and absence of moral sense are the principal traits characteristic of the prostitute. The thief generally gives evidence of a more stable and serious disposition than the prostitute. She is less given to alcoholic abuse and in confinement can be more readily induced to work."

The confidence operator type of the prostitute is excellently illustrated, as Harriet Alexander* has pointed out, in Alphonsine Plessis idealized by Alexandre Dumas in *Camille*. Her paternal grandmother who was half prostitute, half beggar, gave birth to a son by a country priest. This son was a kind of country Don Juan, a peddler by trade. The maternal grandmother was a nymphomaniac whose son married a woman of loose morals by whom a daughter was born. This daughter married the peddler and their child was Camille. The idealized Camille declines an opportunity for a higher life offered her by a Duke whose daughter she resembles. She prefers the glitter, glare and boisterousness of her life to the settled conditions of normal civilized existence. The religiosity which she displayed is very frequent among female criminals and prostitutes according to Lombroso, Marro, Ferrero, and Havelock Ellis. This results from, as Spurgeon points out in one of his sermons, that strange yet natural law by which excessive religion is next door to sensuality. Emotional religious appeals as the Rev. J. M. Wilson‡ shows, are far from rooting out sensuality and even stimulate increased licentiousness. In the

*Medical Standard Vol. XIV P. 43.
‡Journal of Education, 1881.

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case of Camille, as in others, this religiosity led to the term *Lorette* being applied to the French *demi-monde* during the second empire. This title was given because their favorite church was that of the Virgin of Loretto. The same phenomena have been noticed among female criminals. The criminal, as Havelock Ellis remarks, when not superstitiously devout is usually stupidly or brutally indifferent. The phenomena of religiosity as might be expected is peculiarly frequent among sexual offenders. Sixty-one per cent of these are frequenters of church. Among 200 Italian murderers Ferri did not find one who was irreligious. When a woman who had strangled and dismembered a child in order to spite its relations heard her sentence of death pronounced, she turned to her lawyers and said: "Death is nothing. It is the salvation of the soul that is everything. When that is safe, the rest is of no account."

The apparent increase of crimes among women is not due solely to the influence of education or of the removal of seclusion but to the fact that criminal woman who, formerly secluded, induced man to commit crime for her, is now, under improved social conditions, compelled to commit her own crimes. This is especially the case, as there is less chance for detection than there was under conditions where as in Spain and elsewhere women are closely watched. Careful study of sex in crime indicates that the crime rate of anti-social criminality falls among men as it rises among women. With the growing enfranchisement of women there is also a greater tendency to hold them to stricter accountability and hence a greater tendency to increase in the registration of criminality. With the growth of sentiment against drunkenness many criminals are now made by law from offenders formerly ignored. Unfortunately also early statistics are very defective, since a great many sentences were suspended if criminals, especially women, consented to go beyond the seas. In dealing with the influences of education it must be remembered that many moral defectives are now able to obtain education which formerly was inaccessible to them. Education has not increased crime, but more criminals are educated.

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For anthropometric purposes I began a series of investigations along the lines already indicated at the State Home for Female Juvenile Offenders at Geneva, Illinois. For the data here employed I am deeply indebted to Mrs. Ophelia Amigh, its efficient matron, and to Drs. H. L. LaBaum, Ava Michener and Mary C. Hollister.

The mental side is the first that attracts attention. There was but one demonstrable case of insanity. This was of the periodic type and was not benefited by hospital treatment. The insane source of the alleged criminality was discovered in the State Home, not by the parents or court officials who sent the subject there.

No demonstrable motor expressions of epilepsy have been observed, albeit some of the mental phenomena manifested, decidedly suggest epilepsy. The craving for excitement, for intoxication, for uproar, which is such a characteristic of primitive man and of frontiersmen, finds among criminals its chief satisfaction outside the prison, in the love of orgy which, according to Ellis, is confined in its extreme forms to the criminal and his intimate ally, the prostitute. Ellis here puts things too strongly since this condition, an expression of unstable equilibrium, crops up very frequently under conditions of strain among people who certainly do not belong to the criminal class. Indeed in many natures strain from conventionality produces the effect of the prison on criminals. In Germany periodic explosions in prisons are known as *Zuchthaus-knall* and have been described by Delbruck and Krafft-Ebing. In the English-speaking countries they are comparatively common and were described by Eliza Farnham* in Sing Sing prison over half a century ago. Sometimes the prisoners know when the fit is coming on and will ask to be locked in refractory wards themselves. The younger they are the worse they behave. Some years ago in the Illinois State Home then under charge of a Christian Scientist, an insurrection drove nearly all the officers from the place. Nerve storms are still frequent in this institution. In inmates of a low order of intelligence personal violence rather than

*American Journal of Insanity, April, 1846.

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simple destructiveness often occurs. These outbreaks have a tendency to spread because they are often stirred up for mischievousness.

Like Dr. Pauline Tarnowsky, Drs. L. H. LaBaum and Ava Michener have found that the onset of puberty, so far as the menses are concerned, displays many irregularities. The usual influence of institutionalism on arrest and irregularity of menstruation has here to be taken into account. Allowing for this, menstruation often ceases for a month or two or a year after it is once established. This was long ago noted by Du Chatelet* among the same class in Paris sent to the reformatory convents. The girls thus affected are in perfect health and show no ill effect from the cessation. The menstrual flow commences again without the aid of medicine. Some of the girls who have been in the Home since the age of 10 or 11 years have never menstruated, yet are robust, healthy girls, nearing the time for their final dismissal (the age of 18) from the Home.

It is a noteworthy fact that among many primitive races menstruation displays many irregularities.† Cook, the ethnologist of the Peary expedition, found that menstruation among the Eskimo women only began after the age of 19 and was usually suppressed during the winter months. Lapland and Greenland women usually menstruate every three months or but two or three times a year. On the Faroe Islands menstruation is frequently absent. Among the Samoyds menstruation is so slight that its existence has been denied. Among the Guianas of Paraguay menstruation is not only slight in amount but the periods are separated by long intervals. According to A. B. Holder, the full-blooded Indians of Montana do not menstruate as freely as white women.‡ Among the naked women of Tierra del Fuego there are no physical signs of the menses. From time to time, cases appear in American medical literature in which healthy women resemble the Eskimo and Fuegians in this particular.

**American Journal of Obstetrics*, 1892.
†*La Prostitution.*
‡*Psychology of Sex*, vol. II, Ellis.

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Of the inmates of the institution examined, one began menstruating at 9, two at 10, two at 11, twelve at 12, thirty at 13, twenty-eight at 14, fifteen at 15, and eight at 16. These figures differ from those given by Pauline Tarnowsky. Two per cent began at 11, fourteen per cent at 12, fourteen and sixteen hundredths per cent at 13, fifteen and thirty-three hundredths per cent at 14, nineteen and thirty-three hundredths per cent at 15, twenty and sixty-six hundredths per cent at 16, eight and sixty-six hundredths per cent at 17, three and thirty-three hundredths per cent at 18, and two per cent at 19. Forty per cent of Tarnowski's prostitutes had begun menstruation between 11 and 15. Ninety per cent of the Geneva juvenile offenders had begun menstruation between the same periods.

There are therefore striking differences as to the late and early onset of menstruation between the Chicago and the St. Petersburg cases. Neither climate nor early sexual knowledge will account for these differences. It is true that Joubert* of Calcutta claims that early menstruation in the Hindoos is due to precocious sexual knowledge and early exposure to sexual excitement. From the early marriages of the Hindoos and the phallic element of their worship these conditions are obviously present. To them many of the Indian tribes which menstruate late ascribe the onset of menstruation. Such conditions are present in all large cities in slum districts where the population is originally of rural origin. In all probability atavistic peculiarities when not due to sexual precocity, the product of arrest at the fœtile or simian epoch of intra-uterine existence, are of influence here.

The influence of irregular sexual life possibly dependent on arrest at the indifferent sex period of intra-uterine life, must be taken into account, since as Dr. Michener remarks, three-fourths of the inmates of the State Home are addicted to sexual perversities among themselves indicating the existence of sexual perversion.

The genitals in eighty-three cases were normal; in seven cases were excessively developed and in seven were

*British Medical Journal, May 15, 1895.

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arrested in development. There was one case of markedly deformed labia. A large proportion of the inmates had had early sexual relations, as determined by confession or hymenal conditions. The condition of the hymen and vagina in many of these girls with their explanation of the same justifies the opinion that practices described by W. T. Gibb* as present in New York are to be found in Chicago, albeit imported from Europe. Gibb cites cases where adult females, with designs to enlarge a child's genital organs so as to fit her for coitus, introduce the finger, candles, round sticks or stones into the child's vagina. In the observance of ancient phallic worship, stones shaped like the adult penis were forced into the vaginæ of children to prepare them for sexual intercourse. The practice of thus injuring children is common in Europe. Mothers themselves frequently inflict these injuries upon their own children for the purpose of selling them into prostitution, very young children being particularly desired for sexual intercourse, especially by old men. Casper† cites the case of a 10-year-old German girl whose vagina had been dilated in this way by her mother, who first used her fingers as dilators, and then forced a long smooth stone into the vagina. Ogston† refers to this iniquitous practice in Edinburgh and describes the peculiar funnel-like dilatation, it is also described by Tardieu‡ and others.

There were nine cases of syphilis and fifty-four of gonorrhœa which, considering the class is not a very high percentage. The percentage of accidentally acquired venereal disease could not be determined. It is probable that this is large since cleanliness is not as predominant among these girls as it is with open prostitutes. Clandestine prostitution for this reason is the great source of venereal disease.

Among the inmates nearly all types of criminals occur. There are, to adopt my classification elsewhere given, congenital criminals, accidental criminals, periodical crimi-

*McLane Hamilton's *Legal Medicine*, Vol. I, p. 650.
†*Forensic Medicine*.
‡*Medical Jurisprudence*.
§*Attentats aux Moeurs*.

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nals, criminals on occasion and law made criminals. As elsewhere the weak-willed criminals predominate. There is also a by no means small number whom external accident has placed in the institution. Home environment as already pointed out has been a potent factor in this particular.

The number examined was 111, of whom seventeen were Americans, twenty-eight Germans, twelve negroes, eighteen Irish, three Jews, four Polish, nine English, three French, one Italian, one Swedish, three Bohemians, seven Scotch, four Norwegians and one Swiss. As parental nationality or race was not obtainable to the extent required these figures cannot be properly analyzed. The Jewish percentage is much greater than is usually claimed but does not much exceed the percentage of other degenerative states among this race, in whom intermarriage has added to the effects of hereditary defect. The percentage of hebephrenia and epilepsy among Jewish boys is as great as this. In all probability many Americans, English and Scotch should be placed among the Irish as of Irish parentage. While environment explains the extremely low crime and prostitution rate of Ireland, still Ireland for centuries has shipped her degenerates to the British colonies, to America, to England and to Scotland. The Irish rate is lower proportionately than the American rate of Irish defectives. The French and French Canadian rate is high, but no higher than the general rate of defectives among this class. The negro rate is by far the highest with perhaps the exception of the Swiss. This is in accord with the growth of degeneracy among urban negroes. City life attracts the most active degenerates from rural districts. Since the war there has been marked increase of degeneracy among the negroes. Another element however, should be taken into consideration; the negro is now more judged by white standards and this produces an undue proportion of negro criminals, hysterics, and lunatics. The usual influence of urban conditions on rural defectives is here evident. The thrifty republic Switzerland has not abandoned its old-time policy of shipping defectives elsewhere. It furnishes likewise an undue proportion of the jobbing "German"

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politicians of Chicago. The Scotch and English proportion indicate the effects inebriety may produce on the offspring. To a certain degree this is also illustrated among the Irish. The Bohemian and Polish contingent is large, but no greater than the proportion of degenerates found among the defectives shipped from those countries for labor purposes. The Norwegian proportion is high but no higher than the pro-

of hereditary defectives from that country. Among Norway's rural population,monotony, isolation, defective diet and bad sanitary conveniences have produced the same effect on farmers' wives that Awl, Brigham, Ray, Patterson and other American alienists found to be so frequently produced on the farmers' wives of New England, of New York, Pennsylvania, of Ohio and Iowa, during the first four decades of the last century. The same is true to a lesser degree of Sweden. Maritime nations of necessity, moreover, have an undue proportion of juvenile criminals which result from the corruption occurring among sailors through their contact with primitive vices and with vices produced by enforced celibacy.

(*To be Continued*).

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CLINICAL OBSERVATIONS ON A NEW HYPNOTIC.*

By Dr. H. SCHOENFELD.

NOTWITHSTANDING the numerous hypnotic drugs which the physician employs in his practice there is a constant accession to the list, which proves conclusively that none of them fulfills the requirements in every direction. As a matter of fact, those in common use show defects of various kinds; it may be that their action is occasionally unreliable or that in consequence of unpleasant and injurious by-effects their influence upon the organism is not entirely free from danger. In respect to promptness of action morphine and chloral hydrate head the list, but we make use of them only in cases in which other remedies are inefficient, or in which it is necessary to secure a rapid and positive effect irrespective of any sequelae. Trional and sulphonal are not indicated for prolonged use, and are contraindicated in some organic diseases.

A new hypnotic has been recently introduced under the name of hedonal. After Schmiedeberg had recommended the urethanes as representatives of a new group of hypnotics it was found that the ethyl urethane was efficient only in considerable doses, and hence not applicable for therapeutic purposes. In order to augment its effect Dreser replaced the ethyl group by higher alcohol radicals, and as a result of experiments on animals became convinced that the combination with methyl propylcarbinol was most serviceable.

*These observations were made in the clinic of Professor Ziemssen, in the University of Munich.

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Hedonal is a white crystalline powder, dissolving with difficulty in cold water, readily soluble in hot water and alcohol and tasting like peppermint. Of the results obtained by Dreser in his experiments on animals, which were made on rabbits, fishes and dogs, the one to be particularly emphasized is that hedonal acts far more intensely than ethyl urethane. Even in dogs, which in general are very insusceptible towards hypnotics, sleep was always produced, while Schmiedeberg was unable to accomplish this with ethyl urethane. With regard to the dosage Dreser also noted that a much smaller quantity of hedonal than of trional, sulphonal and chloral hydrate was required to induce a sleep of equal duration. A special advantage of the remedy is its freedom from action upon the vital functions, the respiration and circulation. No material change occurred in the respiratlon and blood pressure; the temperature fell slightly, so that the artificially produced sleep is very similar to the physiological. In regard to the uripary secretion there was a considerable increase, and by determining the freezing points of the urine before and during the administration of hedonal, Dreser found, on comparison of these, that a specific stimulation of the secreting part of the kidney takes place. Further he found that during hedonal sleep there is a marked retardation of the reflexes, and is led to ascribe to hedonal this altered condition of the nerve cells. He expresses himself as follows on this point: "Under the influence of this hypnotic the nerve cells react and conduct more slowly. In order to excite a reflex movement an increase of the electric current is necessary, and from this it appears that the conditions necessary for the occurrence of sleep, namely, a gradual isolation of the nerve cells from external influences, are effectively brought about through hedonal. The rest thus afforded the central nerve system permits of a healthy sleep."

As Goldmann has pointed out in his article on hedonal, diuresis is particularly marked when the drug is given in solution, and in consequence of this an interruption of sleep may readily occur. For the same reason the duration of sleep may be diminished, since hedonal is rapidly absorbe

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and eliminated with equal rapidity. Moreover, if administered in solution the characteristic taste becomes more perceptible. On this account it is advisable to administer the remedy in powder form. Goldmann also calls attention to its complete oxidation into water, carbonic acid and urea, in consequence of which unpleasant after-effects, such as vertigo, nausea, and protracted drowsiness are completely obviated.

Numerous experiments with hedonal have been made in various clinics with favorable results, especial stress being laid by all upon its positive innocuousness. Commonly it was given in doses of 15 to 45 grains, chiefly in the milder cases of agrypnia, with the desired effect. If the sleeplessness was due to painful affections its action was unreliable, since it is only a pure hypnotic and not a sedative. From doses of 15 to 30 grains sleep of seven or more hours duration was obtained, this resembling the normal. The drug had no influence upon the blood pressure, pulse, respiration and temperature, and the variations were not different from those present during physiological sleep. In regard to diuresis the observations of various observers are conflicting.

No injurious effects were observed by any observer. Hedonal was well tolerated by patients suffering from stomach trouble, and could be given in cases of fever and cardiac affections without any injury. Unpleasant by-effects of trivial character have occurred in a few instances, such as eructations (Schüeller) protracted drowsiness (Benedict); attributed by him, however, to the great weakness of the patients and vomiting after the first dose (Menz).

All authors unanimously report that in cases in which hedonal is efficient, the sleep produced is uninterrupted, quiet and dreamless, the patient waking up readily and feeling refreshed. The drug was employed almost exclusively in cases in which sleep was not prevented by physical pains and in conditions of excitement of the central nervous system. Schuster observed satisfactory results from doses of 15 to 30 grains. Sleep occurred immediately and lasted from five to seven hours. In only isolated

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instances was there absence of effect or insufficient action, which he attributes to the use of too small doses. In one case of Basedow's disease 30 grains proved ineffective. Schüeller who tested hedonal in the Psychiatric Clinic of the University of Vienna, had partially good results, but also reports several cases in which the remedy was completely inactive. He expresses himself as follows: "Hedonal does not belong to the list of almost absolutely reliable hypnotics. Its efficacy is confined rather to cases of slight agrypnia in which, although there is a need for sleep and rest, these are prevented by conditions of excitement in the cerebrum." On the other hand, Raimann found that it failed to act in conditions of marked excitement. De Moor reported good results especially in uncomplicated insomnia. In several patients he observed drowsiness on the day following its administration, but no injurious after-effects, and emphasized particularly that it is well tolerated in cardiac cases without reaction. Haberkant speaks in general very favorably of hedonal, and is firmly convinced of its safety. In conditions of exaltation the use of adequate doses produced sufficient sleep. In several instances he noticed polyuria, which, however, was never so decided as to interrupt sleep. It is his opinion that the increase in the quantity of urine is produced only by large doses given for a long time. He believes that after prolonged administration there is a weakening of the hypnotic effect. The results obtained by Mueller were much less favorable. Aside from a rapid subsidence of the hypnotic influence he observed in two cases tinnitus, vertigo, and double vision. In severe insomnia sleep lasted only a short time, otherwise it extended to eight hours. Occasionally there were complaints of lassitude and nausea the following day. Diuresis was increased in many instances, and occasionally to such an extent as to interrupt sleep.

We see, therefore, that aside from the experience of Mueller, the results were almost completely favorable. These observations I would supplement by my own, which were made in the Clinic of Professor von Ziemssen, at Munich, in which hedonal has been employed since about a

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year. Before giving my own opinion on this hypnotic I will first report a series of cases in which hedonal had been administered for a longer or shorter time, in order to illustrate its manner of action.

Case 1. Scurvy, *purpura hemorrhagica*. In this case the patient could not sleep on account of pains. Hedonal was given in the powder form. After 15 grains sleep of three hours duration occurred in about one-quarter of an hour. After 30 grains deep sleep of four to five hours duration ensued, and the rest of the night was passed in light slumber. The occurrence and duration of sleep was greatly influenced by the pains. The quantity of urine was somewhat increased. The general condition was influenced, the pulse, temperature, and respiration and blood pressure showing no change.

Case 2. A. S., aged 46 years; cyrosis of the liver; bronchitis. The patient, who had been sleepless for a number of nights slept well for seven to nine hours after 15 to 30 grains of hedonal. Sleep was occasionally disturbed by dreams; diuresis was considerably augmented, and occasionally there was an unpleasant desire to urinate, which interrupted sleep. The amount of albumen present was not affected. Later pains in the ears in consequence of an aural disease developed, and then hedonal became ineffective even in the increased dose of 45 grains. The action of the drug was manifested in about twenty-five minutes. No habituation or weakening of effect took place, since later, after the improvement of his condition, the patient slept as well after 15 grains.

Case 3. E. L., male, aged 37; *endarteritis cerebri saturnia*. This patient had been troubled for a long time with sleeplessness. After morphine and chloral hydrate sleep was restless and followed by headaches. Hedonal, 15 grains, was inefficient, but 30 grains produced a slight effect. Trional in 30 grains caused quiet sleep, but was followed by light headache and loss of appetite.

Case 4. J. D., male, aged 57; *commotio cerebri*. According to the statements of the nurse the patient slept well during the entire night after thirty grain doses of

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hedonal, although he complained of having slept but little. Formerly he had always received a brandy punch, after which he claimed to have slept better.

Case 5. B. S., female; aged 46; pleuro-pneumonia. After the first administration of hedonal the patient was very restless, and did not fall asleep until the dose had been increased to 60 grains. On the following days 15 and 30 grains were ineffective. If violent delirium occurred at night the action of the drug failed even when given in the dose of 30 grains. Unpleasant by-effects were not noticed even from the large dose of 60 grains.

Case 6. Female 35 years old; floating kidney; infiltration at the apices. The patient complained of slight pains in the kidney region. Hedonal 15 grains in wafers proved ineffective. After 30 grains sleep occurred in the course of fifteen minutes. It was quiet and deep and only disturbed by pains over the kidneys. On one occasion a feeling of vertigo was experienced, but no nausea. Frequently, however, there were eructations, but very rarely a slight desire to urinate. The quantity of urine in general was usually not much increased. No other disturbances were complained of. The action of the drug became attenuated after a time. Trional produced a restless sleep, the patient feeling stupid and was troubled with dreams. An attempt was now made to discover whether the patient could dispense with hedonal, but as soon as it was discontinued she remained wakeful the entire night, and in consequence of the sleeplessness felt languid and drowsy the following day. No influence of the drug upon the blood pressure and frequency of respiration was observed.

Case 7. J. B., male, 25 years old; pyopneumothorax. The patient complained of pains in the chest with dyspnea and cough. He received at first injections of morphine until habituation ensued, and the effect remained absent. Hedonal was administered in the powder form, from 15 to 30 grains being given. These doses had a variable effect, the sleep lasting from a few hours to the entire night. The irritating cough had much influence in preventing and disturbing sleep. Morphine, which was later resumed dur-

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ing the intervals, had the same effect as hedonal. After the administration of heroin the cough subsided, and the patient was able to sleep better, although the sleep was often restless. No habituation to hedonal could be discovered. With the exception of vomiting on one occasion no other disturbances were noticed. Diuresis was not increased, nor was there any material change in regard to temperature, pulse, frequency of respiration, and blood pressure.

Case 8. A. F., female, aged 19, endometritis. After the administration of 30 grains of hedonal sleep of six hours duration occurred, this being preceded by palpitation of the heart which soon subsided. She claimed, however, to be a sufferer from this trouble.

Case 9. M. K., male, aged 55; lead poisoning. In this case hedonal was given in 30 grain doses without satisfactory result. While sleep was restless there were no other disturbances.

Case 10. W. F., male, *polyarthritis rheumatica, peri-carditis, pleuritis*. Hedonal in 30 grain doses produced sleep of five to ten hours' duration, which was frequently interrupted. Other disturbances were not noticed.

Case 11. F. K., male, aged 60; alcoholism. .After the administration of 15 grains of hedonal sleep of four to five hours occurred. Increased doses gave no better results. Diuresis was said to be increased; unpleasant by-effects never occurred. The statements of the patient were, however, inaccurate and unreliable.

Case 12. B. S., female, aged 25 years; phthisis. The patient suffered from habitual insomnia. After injections of morphine she slept for about four hours. Hedonal in 30 grain doses caused a quiet and deep sleep of five to six hours' duration. By-effects never occurred.

Case 13. H. G., male, aged 20 years; multiple neuritis. No effect was obtained from 15 grain doses of hedonal, but after 30 grains, sleep of nine hours' duration ensued. The drug had no influence upon the blood pressure, temperature or pulse, nor were there any sequelæ. The quantity of urine was not increased.

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Case 14. B. K., aged 41. Sleep occurred after 30 grains of hedonal, which lasted with short interruptions during the entire night. Aside from unpleasant eructations there were no other by-effects.

Case 15. F. B., aged 41 years; neurasthenia. After the first dose of 30 grains of hedonal the patient slept about five hours, with occasional interruptions. On the second administration he slept during the entire night, waking up only once. Without hedonal he was able to sleep only two or three hours.

Case 16. J. B., female, aged 28, failed to sleep after 30 grains of hedonal, and not even when morphine was added.

Case 17. M. S., tuberculous pneumonia. The patient complained of cough and pains in the chest in consequence of which she was unable to sleep. Hedonal produced a deep sleep of three hours' duration, while after the administration of heroin the sleep was prolonged over five to six hours, because of its pain-relieving properties.

Case 18. W. M., male, 25 years old, lead colic. Doses of 30 grains of hedonal administered on successive days proved ineffective. The patient complained of the bitter taste and refused to take the powder. No by-effects were observed.

Case 19. J. O., pulmonary phthisis. Hedonal of 30 grains produced sleep of five hours' duration, which occurred shortly after its administration. At the end of this time he slumbered with frequent intervals of wakening until the morning. No sequelæ.

Case 20. K. R., aged 77, cerebral apoplexy, emphysema. The patient had suffered for sometime with sleeplessness. After hedonal of 15 grains he slept with interruptions of five to six hours. No disturbances were experienced. The blood pressure showed no change. After sulphonal he claimed to have slept somewhat better.

Case 21. L. Z., aged 61: phthisis. After the administration of 15 grains of hedonal the patient slept for about

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