

their heads with their clothing; while those with agitated dementia are restless and subject to sudden outbreaks of excitement with no external cause. With either of these classes, when the mind reaches a certain plane of deterioration it remains stationary for years, perhaps. All of the faculties are impaired, memory, reasoning, judgment, and will, though the physical condition may be quite sound, and only custodial care is required.

About ten per cent. of all epileptics become insane and the usual result of their disorder is dementia. They require the care of an ordinary epileptic, but as they are subject to sudden outbreaks of rage and fury when they may commit some serious assault or crime with no subsequent recollection, their confinement in an institution is strongly recommended. Recovery of a case of epileptic insanity is most unusual.

"Circular insanity" is characterised by alternating conditions of mania and melancholia, and while made up of the three most curable forms of mental disorders, still is the most incurable itself. These cases are best cared for in institutions, to prevent suicide in a melancholic stage, and extravagance in a maniacal period. By medical treatment these cycles may be retarded or postponed, and the same nursing to be given these cases as that recommended for mania and melancholia. The rest cure and hydrotherapy are useful in both phases.

"Paretic dementia" is a disorder characterised by progressive enfeeblement of the mind combined with general paralysis of the whole body. Intellectual overwork or strain of a system impaired by alcoholism or syphilis is believed to be the chief cause of paresis, and it usually runs its course in from three to five years, when death is very liable to occur. In its early stages it may be mistaken for neurasthenia, but gradually more marked symptoms will be noticed, as the paretic articulation and writing, loss of reflex action, emaciation, failure of memory, emotional irritability, and exaggerated delusions. These delusions are of a most extravagant nature, and usually grow as the physical weakness increases. The patient may believe that he is conducting large business enterprises, or that he is President or the Czar, or he may have delusions of great wealth, and bestow upon those about him checks for large sums, or give them property in many forms. As a rule these patients are far from strong, weak hearts and degenerate livers and kidneys being common among them. Their bones are unnaturally fragile, and in the latter stages of the disease their habits become very untidy, and they have a peculiar liability to bed sores due to a disorder of the nerves which control the nutrition of the skin. As the final stage approaches

there may be apoplectic seizures, or convulsions, the patient becomes speechless, bed-ridden, more helpless than an infant, sometimes hardly able to swallow his food, until finally death comes to his relief. These are most distressing cases, and if possible should be taken care of in an institution for the insane.

The care you can give a patient of this class is most limited. In the early stages, to keep him from squandering his property or scandalising his family by some immoral act; as the disease progresses, to repress his untidy habits, to keep him at some occupation as long as he is capable of performing it; and later to take the same care of him as would be given any paralytic is as much as one can accomplish. While the progress of this disease may be retarded by different medicines, still it is usually fatal, and one feels that death is a welcome relief from conditions so degraded and pitiable.

Paranoia is a form of chronic mental disease, characterised by a gradual development of fixed systematised and elaborated delusions of persecution, conspiracy, etc. These patients in the early stages of their disorder may be called "cranks," and admit of a most elaborate classification. I will only mention a few general symptoms as it may aid you in being more tolerant of the oddities of "queer people," some of whom are unable to control their idiosyncrasies, being in the first process of paranoia. In childhood a paranoiac will be usually bright, though he may be of a shy or solitary disposition, showing eccentricities of conduct as he grows older. He becomes suspicious and depressed, having a vague idea of conspiracy to deprive him of privileges or property. This is called the persecutory state. He constantly feels that a mysterious combination called "they" are against him, and upon questioning he may explain that he refers to some secret society, some religious or political organization or some important person whom he may have known about, all of whom are working to harm him. These ideas are of vast proportions and show great system and organization. Not infrequently these patients are driven to make appeals to the Supreme Court, the President, the Pope, any power they feel can be reached. This is followed by a transition or expansive stage in which he seeks an explanation of all these persecutions. He sees now it was all planned out for him, perhaps discovers that he is of noble or divine birth. He may find much consolation in the belief that he is beloved by some one of a much superior station. Quite frequently these people have distinguished themselves in literature or in history. Many feel that they are ushering in a new religion, and it is something of a shock to find that Mahomet, Swedenborg,

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