Medical Matters.

THE SYSTEMATIC USE OF WORK AS A REMEDY IN NEURASTHENIA AND ALLIED CONDITIONS.



Dr. Herbert Hall, in considering the etiology of neurasthenia (Boston Medical and Surgical Journal), remarks that in very many, if not in all, cases, it will be found that unusual worry or a tendency to overestimate the importance of small things, or some equivalent mental per-

version, existed long before the well-known symptoms of neurasthenia appeared. It is often impossible to distinguish worry from the mental or muscular fatigue which follows long and arduous labour. Worry is a real thing, and it will, if continued, breed in the sanest mind a dangerous unrest and unhappiness. The idea is gaining ground that neurasthenia may be largely or wholly With the establishment of neurasthenia, a feeling of fatigue is often brought on by the mere thought of exertion or by the anticipation of any task. The writer has therefore founded a School of Handicraft, where neurasthenics are taught to work, pottery, weaving and basket making being taught. As far as possible, all evident sources of fatigue, such as eye strain, are eliminated. The patient is at first put to bed for a few days, perhaps a week. Then without any warning he is soon asked to do something, it may be to sit up in bed. The nurse is entrusted with a very gradually progressive programme, which is carried out exactly. It is thus possible almost to eliminate the fatigue and worry of anticipation. Gradually the hours of rest are shortened and the hours of work lengthened, until the day is full of interesting work; the patient forgets himself, and there is no longer need of prolonged rest. The great ends to be attained are pride and satisfaction in work and in life, and self-forgetfulness. Although the effort is still in the experimental stage, the writer has seen enough of its happy results to feel reasonably sure that this method of treatment will give fairly quick results. He hopes by it to reorganise the life of the individual on better lines, and to lead him up to a life of usefulness to himself and others.

Some acquaintance with the early symptoms of neurasthenia is of importance to nurses. Otherwise neurasthenic patients may easily be regarded as merely "tiresome," or "difficult."

HEAT EXHAUSTION AND SUNSTROKE.
Dr. Samuel West describing in the St.
Bartholomew's Hospital Journal a case of heat exhaustion in a patient who had sunstructed to the state of the state of

stroke ten years ago, says:-

Great heat produces two effects. Heat exhaustion, in which the temperature is subnormal; and heat stroke, or hyperpyrexia, in which the temperature is extraordinarily high (110 deg. or 112 deg. F.). It is to the effect of the high temperature that most of the serious after effects of sunstroke are due. This leads, if continued for more than an hour or two, to profound changes in all the cells of the body, producing that albuminoid degeneration which is described by the general term cloudy swelling. It is most obvious in glands like the liver and kidney, but its effects are most serious in the heart and nervous system. Even in the most violent of the fevers where the temperature ranges high, like typhus and some forms of pneumonia, the cardiac weakness which arises is to be referred in great part to this effect of heat upon the muscle cells, and not alone to the toxins produced.

In the nervous system the morbid effect upon the delicate nerve tissues may leave after results of the most varied kind. These results are to be explained by the particular part of the nervous system upon which the stress of the lesion has chiefly fallen, but why the stress should fall in different cases now upon one part and then upon another is not so clear. In some cases it affects the higher intellectual centres, and the patient becomes incapable of continued mental effort, weakminded, emotional, and deficient in self-control: Months may pass before mental power is restored, or the patient drifts slowly into a condition of permanent mental weakness, im-becility, or insanity. In other cases the higher centres escape, and the stress falls on the motor regions of the cortex, so that the slightest muscular effort causes great exhaustion and

fatigue.

The general effects of high temperature, like those due to toxines, are usually symmetrical, and the lesions involve the symmetrical parts of the nervous system more or less equally; but if not, or if recovery be more complete on one side than the other or in one part than another, the loss of power may be unsymmetrical; hemiplegic in type if the whole of one motor region be involved, or partial if special regions be affected; so one arm, one leg, or one side of the face may be left weak; or epilepsy may develop, and the patient become

previous page next page