

intense wakefulness, low-muttering delirium, "subsultus tendinum," and great exhaustion. The temperature may be raised, and should in all cases be tested by a thermometer. The majority of uncomplicated cases get well; others sink from exhaustion, pneumonia, or other causes.

**Management.**—The object in treatment is to prevent the further introduction of the poison into the system. The utmost care and attention are required, tact, and watchfulness to quiet the nervous excitement and to sustain the strength while the accumulation of alcohol is being thus eliminated from the system. All stimulants should be withdrawn if the patient is young and strong; if there is a history of a previous attack these are as a rule withdrawn gradually. Calomel is usually given to stimulate the liver, and sometimes hypodermic injections of morphine. The one object is to induce sleep. Nourishment as indicated should be given often and cautiously. All force, as in the form of straight jackets, should be discountenanced. Well-trained attendants, combined with kindness and humouring of fancies, seem to be sufficient; even in the most violent cases. It is well not to restrict the patient from reasonable muscular exercise, and this conduces to sleep and appetite. In acute alcoholism the patient generally sleeps off the attack. The chief thing is to substitute an easily digested and nourishing diet for the alcoholic stimulants, which can then be dispensed with altogether. Strong soups of meat are of much value. The best medicinal treatments are bitter tonics, as nux vomica, quinine, calumba or gentian, with spirit of chloroform and capsicum.

In active or violent delirium, measures must be taken to prevent the patient injuring himself or his attendants. Fire-irons, knives, scissors, razors, and crockery will have to be removed from the room, and the windows securely fixed, or fitted with stays to prevent the patient jumping out. A second person should always be in readiness in case more help is required suddenly; electric bells should be near to ring if the patient becomes suddenly violent. In exceptional cases it may be necessary to resort to the straight jacket and the restraining sheet.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss C. McDonald, Miss P. Saunders, Miss MacPherson, Miss M. James, Miss Donald, and Miss F. Anderson.

#### QUESTION FOR NEXT WEEK.

What are the causes of tetanus, and what is the nursing treatment?

## MENTAL DISEASES REGARDED AS DISORDERS OF INSTINCT.

The Annual Address delivered to the nursing staff of the Retreat, York—a function which, inaugurated some ten years ago, has grown in importance and interest—was last month, says the *Asylum News*, given by Dr. John Macpherson, a Commissioner in Lunacy for Scotland.

Dr. Macpherson opened his address, "Mental Diseases Regarded as Disorders of Instinct," by asking his audience to consider the question of insanity from a new point of view, and by remarking that usually when speaking of mental diseases people implied simply disorders of the intellect. There was a disposition to reduce all insanity to disorder of the intellect, and the lecturer, with a completeness and vividness of illustration, went on to submit that there was something radically wrong in that particular conception of insanity and of the insane which was confined by any such limitation. He traced and illustrated the presence of intellect and of instinct in the many manifestations of organic life. To emphasise instinct as distinct from intellect, he cited the case of the bee, and called attention to the formation of the honeycomb, which, he said, could not be excelled for adaptation to its purpose by the highest intellect. Other instances of instinct were given, among them that of the horse-fly, whose eggs are hatched in the stomach of the horse, to secure which object the fly lays its eggs on the shoulder or legs of the horse—parts of the body which the horse can conveniently lick! With other instances Dr. Macpherson strengthened his opening thesis, that instinct is the predominating factor in all life.

#### INTELLECT AND INSTINCT.

The lecturer proceeded to define intellect, Intellect, he explained, was feeble where instinct was strong. There was no intelligence in which some traces of instinct cannot be discovered, and no instinct which is not "surrounded by a fringe of intelligence." Both had a common origin, both were products of life; but intelligence, however, was the peculiar property of the higher animals, especially of man. It did not supplant instinct in man, but modified it. Dr. Macpherson divided instinct into two classes, the form which is common to all animals, and the form which is peculiarly human; and the latter class he sub-divided into seven classes, as follow: (1) The instinct of self-preservation, (2) the instinct of self-abasement and subjection, (3) the instinct of self-display and elation, (4) the social or herd instinct, (5) the instinct of curiosity and wonder, (6) the instinct of pugnacity and anger, (7) the parental instinct. Man, then, according to this view, was a bundle of instincts which form the basis of all human activity and which supply the driving power by means of which all human actions, whether they be good or bad, are initiated and carried on. Take away the impulses coming from these

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