

nervous, afraid, sensitive, or suspicious, respond to a simple educative, reassuring conversation, and go away encouraged to continue the fight. The Clinic not only serves the interests of the patients, but is a very satisfactory and helpful way of demonstrating to students the types of nervous and mental illness which so frequently are seen in general practice. . . . In the past the teaching of psychiatry has been a reproach, but now under the excellent conditions which exist and the friendly relations which have been established between the Royal Infirmary and the Hospital, it is hoped that the great majority of the students will have an opportunity to familiarise themselves with the various states of mental illness to an extent which previously has not been possible."

Concerning suicide, which is on the increase in Scotland, Dr. Henderson writes that suicide and psychiatric work are closely related.

"Those conditions of which suicide is so frequently the outcome, are transitory recoverable states, conditions which with help and reassurance can be completely re-adjusted so that the individual can again become a satisfactory member of society. People are often ashamed of having harboured the thought of suicide, they consider themselves criminal for having attempted such a deed, they are apt to feel that they will be censured and blamed. That is not the position to-day. We recognise that those who so solve their difficulties are people in trouble, men and women who, through circumstances which they have been unable to avoid, are driven to a desperate course. The reasons are often altruistic rather than egoistic—it is to help others—so as not to be a burden to others—so as to save others from prolonged suffering and so on. I want publicly to advise people in such distress of mind to confide more, to share more, to consult their pastors or their physicians, or their friends, so that they may get such helpful advice and friendly aid as to tide them over a serious crisis. We psychiatrists have some knowledge and experience of such states, and it is one of the tasks of psychiatry to inculcate the gospel of healthy-mindedness. People who are so affected feel friendless and helpless, do not know where to find help, are afraid lest they should be considered weak and be cold-shouldered by their friends. Many, both doctors and laymen, are still frightfully callous, matter-of-fact, and non-understanding of those who are more nervous than themselves. They are apt to be impatient, crude and lacking in appreciation, and often quite inadvertently tend to aggravate the troubles of the neurotic and make him feel a nuisance if not an outcast. It is just because of such feelings that the neurotic often delays asking for help, and precipitates himself into a serious and critical condition which might have been avoided."

"Another general factor which is all the better of being ventilated, is the element of fear which from the cradle to the grave is a predominating influence in all our lives. It is because of Fear that nervous and mental disorders are so common. The fear of mental illness is a real fear, a fear that has prevented many people from taking any interest in those who are mentally affected. Fear possesses the power of producing states characterised by great anxiety, agitation, sleeplessness and distress, but here again help is at hand if it is required, and those worrying over many things can usually be guided to a calmer appreciation and understanding. . . ."

"There is no necessity to build up or maintain arbitrary distinctions, or to feel that physical illness is more respectable than psychic illness—in fact, it is usually the other way round. What I am pleading for is a more kindly conception, a more understanding attitude, a deeper appreciation of how much patience and care and a little decent sympathy means to the nervous patient. There are very few—if any—families free from some flaw, and we have little right to be critical and arbitrary

in our judgment of the failings of others. The more one's experience accumulates the more convinced one becomes that psychiatry plays a much bigger part in the field of preventive medicine—provided it is given a proper chance—than has been thought. Psychiatry deserves far greater recognition than has been accorded to it. It has been considered as an institutional affair that has little contribution to make to general medicine. This is actually far from being the case. The clinical importance of psychic factors in the production of symptoms which may even be considered as organic is slowly dawning, and such conditions as goitre, headache, palpitation, dyspepsia, dysmenorrhœa, pain, may all be created by purely emotional factors. We are so greatly impressed by this that we are putting forward the view that cases, where no organic cause is discovered, should not be discharged from a general hospital as functional or as not serious until they have been examined by the psychiatrist. No condition is more serious, as in nervous or mental illness the entire efficiency of the individual is involved."

In his concluding remarks in recording his thanks to all the officials and members of the staff who so loyally support him in his work, Dr. Henderson says:—

"Miss Thyne, the Lady Superintendent, continues to carry out her responsibilities in the most efficient manner, and to her and to Miss Martin, and to the Matrons of the various Auxiliary Nursing Homes, I am greatly indebted for the smooth working of the nursing arrangements, thus ensuring the best possible care of the patients."

The mentally sick have, indeed, in Dr. David Kennedy Henderson, a wise, sympathetic and understanding friend.

FIRST FRUITS OF THE FOUNDATION.

Miss Annie Goodrich, late Dean of Yale University School of Nursing who has been invited by the Committee of Management of the Florence Nightingale International Foundation, and has accepted, to deliver the principal Address to the International Students, on the occasion of the presentation of Certificates at Bedford College on July 4th, 1935, will arrive in England this month—and will find herself in great request.

The College of Nursing has already secured her to give a Course of eight lectures between May 27th, and June 8th, and she will speak on "The Preparation of the Nurse for Community Service." With her usual generosity Miss Goodrich has offered any fees available for her course as her gift to the Florence Nightingale Memorial.

Miss Goodrich was President of the International Council of Nurses from 1912 to 1915, and together with Mrs. Bedford Fenwick is also an Hon. President, which carries a vote on the I.C.N. Grand Council for life.

It would appear that we are to have other distinguished visitors from U.S.A. in London this summer. The meeting of the Grand Council of the Florence Nightingale International Foundation which is fixed to meet on July 2nd next, is to be attended, we hope, by Miss Effie Taylor, Dean of Yale University School of Nursing, New Haven, a representative of the I.C.N., and also by Miss Susan E. Francis, President of the American Nurses' Association (Miss Clara D. Noyes alternate) and Mrs. Eliot Wadsworth (who is a nurse) representing the American Red Cross.

It will be learned with satisfaction that recently the powerful Florence Nightingale Memorial Committee of the American Nurses' Association has worked in close co-operation with the Committee of the American Red Cross, so that there is now the nucleus of a National American Memorial Committee, officers of this Committee have not yet been appointed. The Board of Directors of the American Nurses' Association has authorised the Committee to proceed with the collection of funds for the Foundation.

[previous page](#)

[next page](#)