

DOCTOR, IS MY HEART ALL RIGHT?"

BY A FAMILY DOCTOR.

PROFESSOR BLANK, of E—, devoted a whole week of the session to lecturing to his students on the subject of heart diseases. He had a private apartment opening off the class-room, to which he was wont to retire after he had finished his discourse, in order to take off his gown, and enjoy a little meditation by the fire. On the afternoon of the second day a modest knock came to the door.

"Enter," said Professor Blank.

And, hat in hand, appeared one of his students, looking somewhat worried and pale.

"What can I do for you, Mr. M.?"

"Nothing, I fear," was the reply. "Nothing on earth can aid me. I have the very symptoms that you were to-day describing. Sound me and see, sir."

The "sounding" was soon performed.

"You're in perfect health as regards your heart."

That was the verdict. And Mr. M. went away happy.

But hardly had the kindly old professor resumed his seat before another knock resounded on the door.

"Come in. Well, what's the matter with you, Mr. C.?"

"I'm a dead man," gasped Mr. C., looking wildly round as if he wanted to clutch something. "I've got heart disease, as sure as a gun."

"Not quite as bad as that, I trust. Take off your coat."

Auscultation and percussion were speedily performed; then the professor laughed in C.'s face.

"Sound as a bell, man," he said. "Go home to your dinner and don't be a fool."

The doctor did not sit down again, however. No, he was afraid there would be more of them, so he hurried along through the quad, and got into his carriage.

But he had two more visits at his residence on the same night, from frightened students, and every day during the remainder of that week he had a visit or two of the same kind.

On the following Monday he got on to fevers, and the students completely recovered from their cardiac complaints.

Now, I do not mean for a single moment to dispute the fact that there is a good deal of heart complaint about, more in fact than there might have been in the early portion of the century, owing to the race for life and the rate at which the world runs, but I do mean to say that there is ten times more functional and imaginary cardiac ailment than there is of the real thing.

"Doctor, is my heart all right?" How often we medical men hear that question! Hear it from strong, robust men, who do not hesitate to sit down in the

chair and permit you to examine their chest. Hear it from nervous, trembling, pale patients, who submit to the auscultation with the same grace they might exhibit if in the dock, and about to listen to a jury's verdict. Hear it from people to all appearance hardy and hearty, round-faced, rosy-cheeked, jolly men, who *do* allow you to feel their pulse, but would no more think of letting you examine the chest, than they would think of leading a forlorn hope—because their nerves are all putty, to put it plainly.

"Doctor, is my heart all right?" How truly happy one is when he can give a patient an answer in the affirmative, and send him away rejoicing, with nothing to do but throw his nervousness to the winds, his physic to the dogs, and get well!

I will give a few of the *symptoms* of functional heart complaint. It must be premised that so closely do these symptoms often approach in character to those of real valvular or other ailments of the heart, that it is no wonder the sufferer therefrom should feel anxious, or that—as he really ought to—he should consult a doctor. It is, nevertheless, a fact to be borne in mind, and one from which nervous people may take some comfort, that those who have the real disorder seldom believe there is anything radically wrong with them, whereas persons with the fictitious complaint, or functional *derangement* of the heart, are very often found in the physician's waiting-room. It is even possible that the symptoms may be of such a character as to deceive a young or inexperienced medical man, for there may be, and often is, a distinct cardiac bruit; a murmur is got up, as it were—not with the patient's consent, of course—when, if he be at all nervous, he seats himself in the doctor's chair. Besides, the actual pain or suffering in the functional derangement of the heart may be, and often is, greater than that in actual disease of the organ.

The pulse may deceive the patient himself from its irregularity. I do not mean irregularity of beat at any given time, I refer more to the fact of its being sometimes very slow and sometimes very rapid indeed. It may be an easily excited pulse: lying down in his own chamber, calm as to mind, and restful as to body, the patient may place his fingers on his wrist and be surprised to feel how steadily his heart is jogging along; but suddenly there is a tug at the door-bell, followed by a rat-tat-tat-tat, which shows that some unexpected friend, of no small consequence, is about to make a call. The patient's heart gives a big, uneasy thud, he feels as if he had swallowed a box-heater, red-hot iron and all, and if he tries his pulse now, why, the rat-tat-tat of the door-knocker is nowhere near it in frequency. To give a simple simile, a heart of this kind is for all the world like a nervous horse. Jogging quietly and steadily along the road on a summer's day, the cool, green grass and wild-flowers on the bank, and reflected from his calm eye, no horse in the parish is happier than he; but all

of a sudden farmer Joskin's man pops his head over the hedge, the horse starts and swerves, then rushes wildly along the road, never caring, never heeding what real danger he falls into, so that he gets clear away from the imaginary one.

Palpitation—not constant—is another symptom that patients often complain about, and there is no doubt that this is a most distressful feeling at times.

Flushing of the face is another, or sudden faintness, or giddiness on stooping down and rising again to the erect position.

The patient cannot, or is *afraid to lie on the left side*, and I have known people who would not go to sleep thus for any consideration.

I was amused at the reply an Irishman—a tradesman—gave me the other day on this head.

“But why,” I asked, “do you fear to go to sleep on your left side?”

“Because, sorr,” he said, “I wouldn't be aloive whin I woke in the morning.”

There may be a disagreeable *fluttering* at the heart, usually caused from flatulence and acidity of the stomach, and during this period, which never lasts more than a few minutes, the heart is undoubtedly labouring, and the fear of impending death is often very great.

The *digestion* is invariably out of order, the appetite irregular, hunger being sometimes inordinate, and at other times gone entirely for days.

When very tired, the patient feels a kind of choking sensation at the root of the throat where it joins the sternum; he is also cross and peevish on such occasions.

Sometimes sleep does good if taken during the day, but not always, for instead of awaking refreshed, as often as not he rises from the sofa cross and snappish with everybody around him, and more so with himself. He feels altogether “mean,” both in the English sense of the word and in the American.

It is no wonder that, suffering from symptoms such as the above, the patient is subject to fits of *great depression of spirits*. He is often, indeed, little better than a thorough hypochondriac.

Now for the *treatment*. Go to your room, lie quietly down on the sofa, and think. Pass in mental review the acts of your daily life and your whole *modus vivendi*; everything you do from the time you get up in the morning until the time you seek your couch at night; what you eat and what you drink, the amount of exercise you take, and the kind thereof; let everything be considered. You *do* know the golden rules of health. I surely have not been preaching to you in vain for the last dozen years. You know as well as I do that if you do not breathe fresh air in-doors and out, waking and sleeping, you are

not living, but only existing like a fish in muddy water, or grass in a dark cellar. You know the value of healthful exercise, and the bracing effect of the morning tub, and the utility of the weekly warm bath in assisting nature to eliminate matter which if retained renders the blood impure. You know that intemperance in eating or drinking means slow, sure suicide, and that the want of good sleep at night is ruination to brain, heart, and nerves. You know all this. You have, therefore, only to rectify your way of living. But merely thinking about it will do no good. Take a note-book and sketch out your daily routine as regards an attempt at health-recovery: your time of getting up, your bath, your exercise and the kind of it—pleasant it must be, or it will do no good—and your daily diet. Write down also your present symptoms, and after a fortnight of your new *régime*, if it shall have been skilfully made and boldly adhered to, you will be surprised to find several of your old distressing symptoms missing. Again write down your symptoms, make still more reforms, and so go on to—with God's blessing—good health.

It may be that a belladonna plaister will be needed to quieten pain and heart-action. Try it.

The circulation, at all events, will need to be stilled and regulated.

I have found that doses now and then, when a patient feels depressed, of a mixture containing tincture of assafetida and carbonate of ammonia in camphor-water is very good (any respectable chemist will tell you the dose, according to age, sex, &c.). Another excellent remedy, which may be obtained from the chemist and kept in the house, is composed of the ammoniated tincture of valerian, tincture of lavender (co.), and tincture of rhubarb in dill-water or peppermint-water. Do not be always taking either, but have them ready.

Constipation, if present, may be relieved by a dose of tincture of rhubarb with a little *sal volatile* taken in an ounce of senna infusion: a capital remedy, but take plenty of exercise for this complication, and plenty of green vegetables and fruit.

Bismuth—the trisnitrate—if there be much irritability and acidity, does good, combined with soda, and taken in laurel-water. The dilute phosphoric acid, if nervousness be present, or the nitro-hydrochloric acid, in the infusion of quassia.

If there be a gouty tendency, you had better see a doctor.

But pepsine in some form is sure to do good—the pepsine tablets of the shops—and, at the same time, if the patient be weak in blood, a good trial should be given to the citrate of iron and ammonia.

Tea and coffee, if taken at all, should be very weak; and stimulants should be avoided entirely.

