

are much to be preferred for the open air, and for this purpose their culture will be under more favourable circumstances if you have not too hot a situation, nor one which is robbed of its moisture by any large tree. Then, again, a peat soil is most decidedly more favourable for the cyclamen in the open air.

Now, an important item in our gardening this month is that of pruning: it is, first of all, the great month of all others in which we cut our roses carefully back: a good deal of judgment is necessary in carrying this out. To begin with, all the long, weak, and spindly branches should first come off close to where they spring from, and for this reason: they are never likely to be of any service to you for growth or for bloom, and allowing them to remain on will only tend much to weaken the whole standard: and next, the strong shoots must be shortened back in accordance with the proportions of your tree.

Nor should a day longer be postponed any pruning of your currants and gooseberries: still, on the other hand, the danger of commencing the pruning *very* early in the year is that afterwards severe frosts may do damage; no pruning at all should indeed be done when any frost is about. Another heavy and most necessary operation this month is the making up of our cucumber frame. Of course, where hot stable manure is always at hand—and this is generally the case where gardening is on a large and expensive scale—a frame is always in working order, but in our



CYCLAMEN.

ordinary and quiet domestic gardening we make up a frame early in the month, and we shall find it of enormous use, especially in its early stage, for forcing on endless seed-pans and pots, which we afterwards remove to our greenhouse. In fact, a good frame—and if there are two, all the better—enables us not only to keep up successional bloom in the garden, but our stock of vegetables can also be all started under its shelter, and eventually pricked out when removed from the greenhouse.

A FRIENDLY TALK ABOUT HYSTERIA.

BY A FAMILY DOCTOR.



"WHAT'S a cure for indigestion, doctor?" It was an odd sort of question, given in an odd off-hand way, and at an odd time. For Mr. N—and I were riding together outside an omnibus, and the "bus" had stopped to "pick up." I smiled, but made no reply. And after we had descended and were walking together I said quietly—

"Just, N—, as if indigestion didn't depend upon a hundred different causes, or rather sets of causes, and just as if there were not a dozen different sorts of indigestion!"

Now Hysteria, which I am going to treat of to-day, is almost, if not quite, as complex a subject. Nevertheless, I believe I can in one paper give many useful hints, and tell the reader some things he did not know before. Perhaps there is no ailment under the sun that is less generally understood than hysteria. It is one, too, for which the sufferer seldom receives a due meed of pity. The patient is said to be delicate and nervous; this can be readily forgiven her, but human nature can go no greater length, and when the adject-

tive "whimsical" is added, it is usually with a slight shrug of the shoulders.

Now the reason why I claim pity for one afflicted with some form of hysterical ailment is this: albeit the disease be not real in the true sense of the word, it is not "put on"—to use a simple term. The patient is a true sufferer; she may certainly be deceiving others, but she has deceived herself in the first place. There is really no shamming about the matter—no feigning of illness which she does not really and truly believe exists, probably in a very aggravated and dangerous form. She is sensitive to a degree, easily hurt either in body or mind, while the very fact of the mind being turned inwards—if I may so phrase it—and permitted to meditate and dwell for a long time on certain fancied ailments, may account for the production of some real trouble in the ailing directions in process of time. A lady, for example, has hysterical heart disease, *i.e.*, she fancies she has heart disease, and that, with an almost acute desire to live, and be healthy and happy, she can neither exist long nor ever be well again. Every sensation, even the slightest, about the region of the chest emanates, she imagines, from this sick heart of hers. The prick of a

pin might be thought a deadly pang from an internal hurt, a morsel of fluff on the inside of the inner garment might be magnified into the most uneasy, not to say painful, sensation in the heart itself; and so in the end the organ becomes to some extent weakened, flabby probably, and prone to palpitate.

Neuralgic pains—real—may for the same reason succeed the merely fanciful.

The question might be asked: "Is a person so afflicted of inferior intellect?" The answer is: "Certainly not, but sometimes quite the reverse." It is often those whose minds are cast in the finest moulds who are most apt to become the subjects of hysteria.

I have mentioned heart disease and neuralgia as ailments simulated by hysteria, but these are not all. Indeed, it would be difficult to name an ailment that this hysteria cannot counterfeit, chief among them being—in addition to the above—spinal complaints, that often cause the sufferer to keep to her bed from fancied inability to get up; some limb or joint troubles which render her almost, if not quite, lame, so that she can walk only with difficulty, or with the aid of a stick or friendly arm. I have seen such ladies many times and oft at the various watering-places round our coast, being helped slowly across the pavement from the houses in which they lodged to the waiting bath-chair. I could tell them almost at a glance—at all events, in nine cases out of ten my surmise as to the real nature of the cases would have been right.

Consumption—and consumption, be it noted, without any wasting, though there may be cough, generally hysterical also; difficulty in swallowing—attributed in all likelihood to disease of the œsophagus or gullet; laryngitis—considerably on the increase about the time the poor Emperor of Germany was suffering from his last illness; loss of voice—a very common hysterical trouble, in which the patient cannot, or does not, talk above a whisper, and is usually nervous in a low way, and languid to a degree. But I might fill this paper and another with the multiplicity of cases simulated by hysteria, and effect no good by doing so either.

One thing, however, I must mention, and this would almost lead one to believe that there is in hysteria some perversion of the reasoning faculties—the patient will often eat well and heartily, and she remains in good condition. Can she not, it might be asked, herself see that these facts are somewhat incompatible with a diseased body or a shattered constitution?

It is sometimes said that Mrs. So-and-so or Miss So-and-so likes to fancy herself an invalid. This is, to say the least of it, somewhat uncharitable. There may be instances of malingering in private life, but I believe they are very rare. Besides, given anyone who has suffered from this simulating ailment hysteria for any length of time, and you *have* an invalid, if only for this reason: the person in question has been prevented, owing to her fancied ailment, from living according to the laws of health; she has been thinking too much, *ergo* sleep is disturbed, or at least is not so refreshing as it ought to be; sufficient exercise

has not been, probably could not be, taken, the muscles are therefore weakened; enough pure air to properly purify the blood has not been breathed, the vital fluid is therefore in a permanently vitiated condition; the liver is torpid, and the brain or mind is rendered dull; the bath or thorough ablution has been neglected, and the skin therefore refuses to eliminate deleterious matter from the blood, greater work being thus thrown on the internal organs; while, one way or another, the digestion must be impaired, and mayhap the whole alimentary canal thrown partially out of gear. Other and more troublesome symptoms than even these may occur; so that on the whole, however unreal the ailment she complains of may be, the hysterical patient is deserving of our sympathy.

I have not yet said a word about what is usually termed "a fit of hysterics." It usually occurs in the young and somewhat delicate woman after some unpleasant excitement or another. The lady may have had "a few words" with someone she dearly loves, when all at once she seems to lose all control of herself, gives herself up, as it were, to a sort of *abandon* of excitability of language and gesture. This results in speedy exhaustion, which causes her to throw herself into a chair or on a sofa; she laughs and cries by turns, hardly seems to know where she is, what she has been doing, or what it is all about. One little word of sympathy now from some foolish—I really cannot help using the term—female friend, one kindly pat on the shoulder, and lo! the last act comes, matters become indescribably worse, the choking *globus hystericus* has arisen, and she may be said to have a "fit" now really and truly. She is worn out at last, and so gradually recovers, without, let us hope, the stimulant so often administered by that foolish female friend, who as a rule should never have been permitted to enter the room.

Now I have little to say regarding this fit of hysterics. I do know, however, as a medical man, that it is controllable in its early stage; I do know, also, that it is encouraged as often as not by the patient—in this case I ought hardly to say patient—and I do most earnestly warn those subject to such "fits" that they are not without their danger, present or subsequent.

Hysteria, on the whole, whatsoever form it may assume, is certainly not a complaint to be pooh-poohed or made light of. It is painful to the sufferer, and it is distressing to everyone with whom she is associated. When it is once fairly established, it is difficult to get rid of, and this makes it imperative for the relatives of the sufferer to see that means are adopted to effect a cure as speedily as possible. Changes in the nerves of organic life must take place in cases of long standing, and then restoration to health is doubly difficult. Hysteria often occurs in young people. In such cases it can the more easily be nipped in the bud. At all events, an attempt should be made to do so without delay.

The supposed causes of hysteria I need hardly mention, there being none that would appeal to, or be understood by, the lay reader. One fact, however, deserves notice—namely, that we seldom find the

ailment among those *who work out of doors*. In a great measure hysteria is a disease of polite society. It is sometimes found among men, and here the causes are less obscure—over-work, night-work, high living and fast life with too little sleep, may induce hysteria in males, but it then usually goes by the name of nervous debility.

Now as to the treatment. The hysterical patient generally expects and desires a great deal of sympathy, and some medical men recommend that this be withheld entirely. As I have already hinted, I deem this somewhat harsh. Let the medical man do as he pleases, however—and most certainly the physician should be consulted—but *he* is not always with the patient, but her friends and relatives are. Let them not be guilty of want of feeling. They may do their utmost to cheer and rouse the patient without actually turning a deaf ear to all her complainings. Besides, in doing so, there would be the danger of overlooking some real complaint. It is probably like the old fable of the shepherd and the wolf. Never mind, we must look out for the wolf just the same. But how are we to distinguish between a real or inflammatory pain, and that which is merely hysterical? We have that good little fairy yclept the clinical thermometer, and no house should be without one.

As to the treatment during a fit or paroxysm of

hysteria, the dress is, of course, to be loosened, the patient kept as quiet as possible, and the windows opened. Smelling-salts will usually do the rest, or a dash of cold water.

As already stated, in every case of hysteria the family physician must be consulted and obeyed. But it is a consolation for those who cannot easily get medical assistance to know that drugs are not always essential. A few drops of the dialysed iron—say, ten—may be given thrice daily in water, after meals, as this form of iron does not constipate; if there be no paleness of countenance, even this will hardly be needed. Aperients may be necessary, but they must be mild.

But *diet* and mode of living must be regulated. The former should be generous enough, but coffee and tea had better be left out of the scale. Nothing indigestible should be taken. Exercise every day, out of doors, is imperative; so is the bath—cold, if possible—and daily friction to the spine. Healthy occupation is part of the cure, and while amusement is of the *greatest* value, late hours, hot rooms, and excitement must be avoided. To young ladies a course of dumb-bell exercise will often do good. The mind must be kept employed as well as the body, and good sleep obtained at nights from days well spent. Last of all I may mention *massage*.

A SAD CASE.



THE manners of young men,
It strikes one now and then,
Are far from pretty;
And as for Cousin James—
Ah, well! that person claims
Our deepest pity.

Discussing people's hair,
And wanting bits to wear,
Is *not* the fashion;
And when they tell you so,
Why make things worse and go
Into a passion?

And if perhaps, anon
(Believing you are gone),
Folks *should* be crying,
What right have *you* to be
Concealed behind a tree?
It's vulgar spying.

And when they hide their head
(Because their eyes are red,
And you confound them),
Could conduct be more base
Than this—to come and place
Your arm around them?

FREDERICK LANGBRIDGE.