THE IMPORTANCE OF THE EMOTIONAL OR PSYCHICAL NATURE OF PEOPLE IN GENERAL IN THE PRACTICE OF MEDICINE IN ITS WIDEST SENSE*

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THAT the psychical or emotional condition has much influence on patients generally must be evident to anyone who gives it consideration. In the daily life of all it plays its part in affecting the outlook. We have only to observe the effect of disappointment, fear, and joy to make plain this fact. Is it not well illustrated in the child who is relieved by the "kiss to make it well?" and "we are but children of larger growth." As a matter of fact, the unrelieved disturbed emotional condition may and often has serious effect on both mental and physical health which may lead to dire consequences. This is strikingly shown in the many cases resulting from the war. Notwithstanding this, it receives scant consideration in the practice of medicine. This is due chiefly to a defect in the training of the student before graduation and its effect in his practice after. As a result of education the practice of medicine in the past was confined to physical ailments, and for their relief, drugs, too often unpleasant and often drastic, were relied on. To this homeopathy chiefly owed its origin; its decay has kept pace with the rise and progress of rational medicine. In this progress, general medicine has been still concerned with physical diseases, mental and psychical affections being relegated to the alienists who have now adopted the name psychiatrists, though still too often confining their attention to mental disturbances.

Ailments of emotional origin may affect any function of the body and cause as great a variety of symptoms, such as slight or severe pains, loss of weight and vigour, insomnia, disturbed digestion, marked constipation and many others. In the war cases, in addition to milder complaints, were blindness, deafness, paralysis, aphasia, loss of memory, etc. In civil life these severe effects have been met with but the vast majority are milder. The physician's attention is usually focussed on the symptoms of which most complaint is made and a physical cause is sought for, the possible psychical cause receiving no consideration. In some cases without a local complaint it may be difficult to trace to their origin and make sure of their cause and relationship to the symptoms. There may be a secret sorrow which they will not reveal; others enjoy their ill health too much to give up the key to the problem. In many if not most cases, however, the psychical disturbance is easily discerned if its possible existence is only kept in mind. Once found, an assurance of relief will usually gain the confidence and cooperation of the patient, and with satisfactory results; especially, if there is a strong wish to get well. In such cases, the charlatan often has the advantage. He does not concern himself with history or examination but announces a simple cause that rarely exists and gives assurance of a prompt cure. If he secures the confidence and cooperation of the patient, as he usually does because he appeals to his vanity, the symptoms are often promptly relieved. It is the psychical impression, not the means used, that affects the cure. This is aptly illustrated by the following instance. A woman, suffering much discomfort and anxiety regarded as due to pelvic lesions, had these repaired by a capable surgeon who assured her that she should be now quite relieved and there was no occasion for worry But she felt no better, in fact grew worse until she fell in with one of the cults who assured her she would get well under her treatment and she did so very quickly. Had her physician recognized and treated the psychical trouble she probably would have recovered without operation although it also should have been done.

In the great war, the large number of cases of neuroses caused by mental, emotional and physical shock and overstrain and the horror through which the soldiers had passed, forced on the medical staff the necessity of the study of these cases

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and with phenomenal results. Reassuring suggestion played the greatest part in the recoveries. Naturally this has given an impetus to the study of like cases in civil life. In the latter, the onset of symptoms is seldom sudden as severe shocks are rare; usually its beginning is inappreciable and its course slow, and the cause maybe discoverable only by patient investigation. Most of the cases owe their origin to long continued unhappiness, fears, anxiety, worry and overwork with their physical effects; of these probably the first named is the most frequent and potent cause. It is necessary, therefore, to be alive to the fact that psychical disturbances may be the sole cause of the ill-health and at the same time give rise to marked symptoms associated with one or more organs. Also that in all chronic diseases especially, the symptoms are always increased. often seriously, by the patient's fears and anxiety.

That there is neglect of due attention to the emotional disturbances of people all who consider it will agree. The cause of this neglect lies chiefly at the door of medical education. Clinical training in the hospitals has dealt almost exclusively with physical ailments, the emphasis being laid on physical examinations with history relegated to a second place, and worse still, in a resort to the laboratory, especially the x-ray examination, before a full history is obtained and a proper physical examination made. Sound training requires that the greatest importance be placed on the patient's history and it should include the mental and psychical as well as the physical. If this were done, few physicians would ignore the emotions or feelings of the patient to the detriment of the patient's well being as well as the physician's prestige.

This widespread neglect by the profession not only injures its reputation and causes material loss, but forms the very basis for the birth and growth of the various cults that infest the land. The chief, if not the sole, cause of their existence is the failure of the profession to meet fully the psychical as well as the physical needs of the public. It is on the emotional ills of people that the cults live and flourish. They appeal to the psychical nature without knowing it, through their various fads, whether "spinal adjustment" or other. That the cause they assign for the patient's trouble only exists in the adjuster's mind, or forms a cloak for ignorance, is of no moment; that it appeals to the patient suffices to make a psychical impression that gives confidence which may relieve anxiety, and recovery follows. Such cases are met with almost daily in the experience of every physician and can usually be recognized by a little careful inquiry. It is a mistake to regard these ailments as imaginary. Gastric pain due to a psychical cause is just as real as a pain due to ulcer, and in the patient's opinion its relief is just as imperative. The object of our existence as a profession is to lead the way in prevention of diseases, to cure patients when possible and to relieve when this cannot be done. Our contract with our patients is to cure them and in this effort we are under obligation to use any and all means to attain that object whether the illness is physical, mental or emotional, or all of them. If we fail to use the means necessary for relief they will go elsewhere in the hope of getting it, and that hope in itself is often half the cure.

The most difficult are those with no local discomfort to indicate a probable cause of the psychical trouble. The cause has to be ferreted out and this can be done only by securing the confidence and cooperation of the patient, a difficult problem in not a few. It was in such war cases that loss of memory, speech, hearing etc. developed, and, worse still, the depressed and those showing psychical aberrations; in many of these cases the psychical balance was unstable and some were probably more or less affected before the war. As soon as the physicians understood these cases and applied proper treatment, marvellous results followed. Patients in civil life are rarely so severe and dramatic as the war cases, yet their suffering is just as real and relief is just as urgent. The following is a good illustration: a woman with persistent epigastric pain, due, she was told, to ulcer, was anxious to be relieved quickly as she had arranged to go on a European tour in a couple of weeks. Even water caused pain, sufficient of itself to prove that it was not due to ulcer. After careful examination she was assured that she could go if she obyed instructions; this she agreed to with alacrity. She was placed under good nursing care, told to ignore her gastric pain, to eat what was set before her and, as she was constipated, to go to the toilet precisely half an hour after breakfast, forgetting the constipation. The result was that she took full meals daily without discomfort and the bowels moved freely. She gained a pound a day, went to Europe and on her return told her nurses that she was quite well. Her great anxiety to be relieved formed conditions ideal for the success of psychical treatment.

Another case is that of a young woman of high colour and apparently well-nourished; that is, fat enough. Her sister had chronic tuberculosis and she was in daily fear of becoming in-

fected. Haemoglobin was low and strength poor. She had been given Zambilletti's fluid hypodermically for some time, the blood improving, but it had become low again. Her diet was composed almost wholly of carbohydrates. With properly apportioned diet, increasing outdoor exercises as she grew stronger, and assurance that there was no danger of infection if proper care were taken, she was soon quite well. Zambelletti's fluid is good, but proper food is better, neither would have succeeded without the psychical change.

Of the diseases in which psychical symptoms always co-exist, one of the most important is exophthalmic goitre. The psychical disturbance probably always precedes, and is always present at the onset of the attack. Of the exact pathological condition there is still doubt. As the psychical symptoms usually precede and are always present in the disease, and in an increasing degree as the attack grows worse, it is justifiable to regard the psychical condition as a contributing, if not the chief cause of the disease. That it should be so regarded is further supported by the fact that many, if not most cases will recover under judicious treatment. To carry this out, isolation under proper conditions to afford psychical and physical rest, capable nursing, good food, and close encouraging medical attendance is essential. If this course is carried out efficiently it is probable that few would require surgical aid. The disease is evidently a nervous one with marked functional disturbance hence the imperative necessity of physical and emotional rest and encouraging suggestion.

"Nervous breakdown" is a very common complaint; and many take a real pride in telling that they have had it, especially if there have been several attacks. They roll the term "under their tongues like a sweet morsel." I often feel it a misfortune that the term was ever coined. In this condition, the emotional element has a large part if it is not the sole cause. In cases in which recurrence of the attacks takes place the emotional balance has been only improved, not restored in the intervals of apparent recovery. In such, a painstaking search should be made of the history for its unhappiness, worries, anxieties and disappointments; some one or more of them will be found. To effect a cure they must be removed; if that is impossible, the circumstances must be faced with renewed courage so as to be patiently endured, if they cannot be ignored.

The following case seen many years ago is interesting. A young married woman had been in bed for a year without any cause to be found for her invalidism. Her best dressing gown was placed on a chair beside her bed and she was asked to put it on and sit in this while we were downstairs for further consultation. On returning, she was sitting dressed in the gown. It was then suggested that she drive down to the shopping district to see the people. This she did. After that she resumed her usual life of activity.

In all acute diseases, pneumonia, typhoid, sepsis, etc., the emotions have their part. The people reported as "making a brave fight," are those whose emotions are under good control and do not therefore lessen the physical resistance. The man who can calmly face the gravest possibilities conserves his resources to the utmost. It is the surgeon's as the physician's duty to aid in preserving the emotional calm.

We all have known physicians of little knowledge and training who have been successful practitioners because of their optimism and readiness in assuring patients of their recovery, in this manner impressing the patient's psychical condition by raising hope and restoring courage. They have often been the most honest and genial of men. It is necessary to remember that a vast number of the milder ailments, with as well as without local physical symptoms, will recover in a shorter or longer time even without treatment. The psychical nearly always plays a major role. It is from this class, especially the rich, that the cults largely draw their patronage and their sustenance. They will continue to do so as long as physicians fail to recognize their psychical troubles and do not adopt proper means for their relief.

The contrary aspect of the matter merits comment in closing. In any serious disease the psychical symptoms may be so marked as to overshadow those of serious physical disease. This is especially true of tumour of the brain, circulatory diseases, renal disease with uraemia, etc. Each and all of them may have the emotional symptoms so marked as even to mislead the most expert. This is usually due to imperfect examination made often in conditions rendering a more perfect one impossible. Under such circumstances a diagnosis should await the opportunity of a full examination.

The object borne in mind in these addresses was to press on the family physicians throughout Canada, the most important and deserving body in the profession, the need of attention to this much neglected field, but it is hoped that specialists in general, including surgeons, will give consideration to this important matter.