

The author concludes by suggesting the following as the lines upon which the question of remedying the various social defects which tend to suicidal promptings must lie:—

1. Efforts to improve the value of life.
2. To purify and refine the religious and moral sense.
3. To educate the intellect, and enhance the usefulness of existence, so that it may become a settled conviction that the very worst solution of the problem of life is its destruction; and
4. Specially and prominently to raise the social value and status of woman, by education, by a judicious cultivation of the intellect, and by a gradual social emancipation as she becomes more and more fitted by these means to assume a more independent and substantial place in the social organisation.

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*Dr. Russell Reynolds on Mental and Nervous Disturbances of Gouty Origin.*

I.—*Mental Disturbances.*

Many cases have come before me in which there was great restlessness; the patient could not be still for a moment; was alternately excited and depressed; slept badly, or not at all; was intensely hysterical, and could not attend to business; while others have complained of failing memory; of want of power of attention; of suicidal thoughts; of intense melancholy; others of sounds in the ears; voices, sometimes distinct, sometimes not; and some or all of these of long continuance; but yet all disappearing under treatment upon the hypothesis I have mentioned. These symptoms often alternate with, or accompany, those which I mention next.

II.—*Pain in the Head.*

Some of the most intense head-pain that I have met with has been of this character, and been relieved by treatment of an anti-gouty description. The special features are pain on one side of the head, usually parietal, or occipital; "grinding" habitually; but forced into almost intolerable severity by movement, such as the jar of carriage riding, or running down the stairs of a house; and this without any oversensitive nerve-points; without tenderness of scalp; and without any aggravation by mental exertion. It is not affected by posture or by food; it is relieved by physical rest, and may disappear entirely after treatment of the kind that

I have mentioned. It is not anæmic, nor neuralgic, nor dyspeptic (in the ordinary sense of that word), and it yields to nothing in the way of treatment that may be directed against those common varieties of headaches. It is very often associated with some of the other symptoms that I have mentioned, and they must be taken into account when making a diagnosis of the malady.

### III.—*Modified Sensations.*

1. Of these, vertigo is one of the most common, and it may exist alone. It takes sometimes the form of objective movement, but more frequently that of subjective movements, such as the sense of "swimming" or "floating" away. This vertiginous sensation is sometimes determined by posture, and occurs only when the patient lies on one side; it may be the left or the right; the apparent movement of external objects being from that side towards the other.

2. With vertigo is often associated "noise in the ears," not the sound of "voices," but drumming, hissing, singing sounds, recognised to be in the ears, or in one ear, or in the head, and not appearing to come from outside. There is not, or need not be, any mental delusion with regard to these; the patient knowing well that they are inside his organism.

3. Associated with such vertigo and tinnitus there is frequently deafness, and the feeling of "beating in the ear;" and the symptoms are like those described by Ménière; but I have found them in the vast majority of instances associated with a gouty habit. With vertigo and tinnitus there may be much mental depression, or attacks of bewilderment, amounting sometimes to those of *le petit mal*.

4. Modified sensations in the limbs may occur. A large number of people complain of "numbness," "tingling," "creeping," "deadness," or some other altered state of sensibility in the limbs, which, sometimes taking a paralytic, sometimes a hemiplegic distribution, have caused much anxiety; and the more so, because the suggestion of organic disease of brain or spinal cord has sometimes been conveyed, and yet all these troubles pass away. That which I have observed to be in them the most characteristic of their gouty origin is their variability in kind and locality. To-day, for example, there is "coldness" in the left leg; to-morrow, "a sense of heat;" last week, a "pricking" in the right hand; the week before, a "stinging" feeling

on the side of the head, or in the tongue. This wide distribution and variability, so alarming to the patient, is much less alarming to the physician, who recognises in these very facts the elements for a favourable prognosis.—*British Medical Journal*, Dec. 15th, 1877.

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*Professor Gairdner on Spiritualism.*

Mr. W. Irving Bishop, an educated and able young American gentleman, who is now visiting Scotland, has, at the request of many of the Professors of the Universities of Edinburgh and Glasgow, and many other influential citizens of these towns, been giving several "Exposures of Spiritualism" before very large audiences. By means of a careful study of the mode in which the most famous professional conjurors amuse and deceive their audiences, through a knowledge of the automatic and reflex action of the brain, and by great perseverance and practice in performing the "tricks," he has been able to rival the most celebrated mediums in befooling an audience. His peculiar anatomical construction enables him to do feats which no ordinary man could do. He offers to pay one hundred pounds, and a well-known American physician adds a thousand to this, if Mr. Bishop cannot do any "manifestation" whatsoever done by any medium, or Spiritualist, after he has been allowed twice to see it done by such a "medium." His offer has not yet been accepted, either in America or Europe. Dr. W. B. Carpenter has been greatly interested in Mr. Bishop's performances, considering that they confirm many of his views in regard to the action of the brain. Professor Gairdner, in a lecture to his class, on the subject of Spiritualism in connection with Mr. Bishop's "Exposures," of which this is the concluding part, says—

I have never gone into this matter professionally, or even as a scientific man, but have always on the other hand held that the duty of a physician towards these things was to have as little as possible to do with them. But, still, in my career instances have come to my knowledge, and it was in consideration of all these that I was led to attempt to formulate a few nights ago the state of my mind upon the subject by saying—and it is something like a distinct, and I think not an untrue and unintelligible definition—that I call the state of mind of people inclined to Spiritualism *a diseased condition of the faculty of wonder*. I hold that the faculty of wonder, or reverence, if you like to call it so, is an innate and necessary part