

## CLINICAL NOTES AND CASES.

*Folie du Doute.* By P. J. KOWALEWSKY, Professor of Psychiatry and Neurology at the University of Kharcov.

(Concluded from p. 218.)

I shall now allow myself to mention a case in my own practice.

Mrs. Sch., aged 27, wife of a physician. Her father is a healthy, vigorous man. Her mother a sickly woman. Her cousin (related to the two families, the father and uncle of the patient having married two sisters) has attacks of epilepsy. The brothers and sisters of the patient are in good health. The patient was nervous from her childhood. She was married five years ago. Soon after her marriage her husband went to the war, and this made a strong impression on the young lady. During her pregnancy a mole showed itself, followed by violent hæmorrhages. All these causes—hæmorrhages, pains, and mental commotion—highly affected the health of the patient. She became anæmic, suspicious, and anxious about the state of her health. She began to entertain fears that the genitals, but no other part of her body, would take cold, and in consequence of these fears she wrapped, even in summer, the lower part of the abdomen, legs, and sexual parts in flannels. On one occasion, whilst making an injection, the midwife accidentally broke the glass bottle which contained the liquid. This brought on a dreadful fit of terror, the patient fearing that the broken pieces would enter the genitals. She had a throttling sensation in the throat, her arms and legs trembled, and she burst into tears. This acute attack did not last long, but the doubts remained, and from this moment she suffered dreadful torments. She feared that the pieces of glass would fall on her dress, petticoat, or shift, and from thence enter the genitals, and in order to avoid this misfortune, she used to examine, hundreds of times a day, her dress and underclothing, and as soon as this examination was finished doubts again arose in her mind whether pieces of glass had, after all, not remained concealed in her dress. She allowed nobody to make her bed, examining herself minutely every part of it, and frequently when already in bed she used to jump out suddenly and again recommence examining and shaking out the bed clothes. The linen was always washed under her own personal supervision and dried in her own room, as if left out of doors someone might throw glass on it. But even in her own room the linen used to dry either in her presence or with the doors locked. She could not look at objects made of glass, and therefore glasses, lamps, &c., were banished from her house. The

window panes were her great tyrants as she could not do otherwise than put up with them. She could exist as long as nothing was broken in the house, but when she heard the sound of glass breaking in the house she shrieked, groaned, and was in a state of terror. It is a noteworthy fact that she could eat and drink quietly without fearing that the pieces of glass would enter into her mouth, but she was always terrified at the thought that they could come into contact with the sexual organs. She dreaded going into the street, full of fear of coming on pieces of glass. When, unfortunately, she saw a piece of glass, she made a wide circuit round it, but this did not save her from the necessity of examining and shaking out her dress, &c. When the patient looked out of her window into the yard, and someone broke a glass or anything else in an adjoining yard, she had for days long no peace of mind. She was terrified when she had to take medicine out of a glass bottle. She kept examining it to see that it was not cracked, and if a crack did exist it caused her endless terror. Another misfortune soon added itself to the first. The patient began to be afraid of needles. She fancied that the end of the needle would break, fall on her dress, and thence enter the sexual organs. In consequence, before making use of the needle, she used to examine it frequently, and, after having ascertained that the needle was whole, she nevertheless examined her dress and underclothing. In the summer of 1881 she went to Tatta, but this journey, instead of quieting her, made her only worse. Added to all this, the patient was anæmic and heard noises in her ears. *Antiflexio uteri et catarrhus colli uteri.*

We pointed out that neurasthenia could engender many neuroses and psychoses. These neuroses and psychoses may appear alone or in various forms in combination with each other, and we have many clinical cases of such a combination. Under the denomination Onomatomania, Prof. Charcot and Dr. Magnan\* have given an excellent description of pathophobia and uncontrollable obsessions combined. Régis† described emotional delirium with *anxietas præcordialis* combined. A. Takovlew‡ described a case of pathophobia accompanied by "impulsive" acts. Roussell§ showed the connection between epilepsy and uncontrollable obsessions. Gnauck,|| Sovetow,¶ Platonow,\*\* and others demonstrated the combination of delusion of persecution with epilepsy.

\* Prof. Charcot and Magnan, "Archive de Neurologie," No. 29.

† Régis, "L'Encéphale," 1885, No. 6.

‡ A. A. Takovlew, "Arch. Psychiatrie," Vol. vii., 2.

§ Roussell, "The British Medical Journal," 1879.

|| Gnauck, "Arch. f. Psychiatrie," B. xii., No. 2.

¶ Sovetow, "Arch. f. Psychiatrie," Vol. i., 2.

\*\* Platonow, "Arch. f. Psychiatrie," Vol. xii., No. 1:

Wille mentions a case where hereditary ideas changed into "Grübelsucht. Folie du doute," &c. We could quote a great many instances of similar combinations.

We can state that a degenerative psychosis can also appear as a combination of different varieties of delusion. Thus, we can meet delusion of persecution combined with hypochondria, delusion of doubt with hypochondria, or with delirium of persecution. We shall here describe a case where folly of doubt was combined with delusion of persecution.

Countess A. K., twenty-six years old, granddaughter of General K., one of the heroes of 1812. Her father was a very cruel and impetuous man; her father's brother had epileptic fits. The patient's mother is also eccentric. During her lifetime she was suspicious and distrustful. She had lost her husband fifteen years ago, and since his death she had been constantly wandering from place to place—Petersburg, Nice, Biarritz, Moscow, Kharkow, Kiew, &c. The servants could not stay in the house. She at first liked and caressed them, but they soon were out of favour. She at first suspected and soon after dismissed them. When living in her own house, where she always had three doorkeepers and a great many servants, the old countess used every day, before going to bed, to examine herself the whole house, after which mother and daughter locked themselves up in their rooms. The old countess frequently got up in the middle of the night and went all over the rooms, fearing that someone was hidden in the house. The distrust of the old countess showed itself specially in conversation on serious subjects. At every new idea that was started she used invariably to put the question—"What does it mean?" and at any news she heard—"Why should it be so?"

The patient had six brothers, of whom one died of general paralysis of the insane. Another, a very nervous man, died in a state of lunacy. A third involved himself in speculations by which he ruined himself and his family. Two others are so stout that, when driving in a carriage, they have to sit opposite each other. The brothers are, notwithstanding, clever, intelligent, and practical men. The patient always lived with her mother, and after the death of her father seldom with the other members of her family. Speaking of her brothers, she used to say—"We are very fond of each other, but when we are together we always quarrel." From her early childhood she was nervous and impressionable. Educated by a nervous and suspicious mother, she naturally took after her. In childhood her affections underwent sudden changes. The patient writes in her autobiography—"At times she became pensive, serious thoughts arose in her mind, her heart beat violently, her eyes filled with tears, and their expression ceased to be that of a child, and became melancholy. This state did not, however, last long, and used to end suddenly by some childish frolic

and by an unrestrainable fit of laughter." During her childhood the patient suffered from many complaints, especially those of the digestive organs. Until her sixteenth year she was a thin, pale, sickly-looking and nervous young girl, but from that time she rapidly recovered, and developed herself. She had twice hit her head, once on the sinciput and another time on the occiput. Menstruæ showed themselves in her sixteenth year, and continued regularly without any morbid phenomena except some irritation. The patient was well brought up, and notwithstanding the frivolous, aristocratical life which she led, she found time for serious reading. From some of her writings, which I had occasion to see, it is evident that she interested herself in particular in the relation of man to God, as well as to nature, and in all its surroundings. The problem of existence troubled her. She did not follow religious rites, but her mind was absorbed in religious thoughts, and she endeavoured to study the thoughts of others. She suffered very much morally, and sought for consolation and peace either in God or in nature. By her own writings or by the extracts which she made from books, it can be seen that she suffered mentally, was dissatisfied, and was seeking for peace of mind. She began the history of her life as follows:—"The life of man is an enigma, the possibility of happiness is given to everyone, but fatality often ruins the career of man, and that which could have been will never recur again. There are natures that can love with all their heart, for whom love is as necessary as air and light, and for whom life without love is reduced to a state of vegetation."

This melancholy, despairing state of the mind in search of consolation is to be traced throughout all the writings of the patient. She was not of an even temper. She sometimes felt affection for a friend and confided to her her innermost thoughts and secrets, and then suddenly, without any or for the most futile cause, she broke off all relations with her and considered her henceforth as her enemy and as a dangerous person. These ruptures grieved her intensely, and rendered her suspicious and disenchanted of people. The same used to occur with servants, whom she at first treated as friends and afterwards as enemies, spies, &c. It is a noteworthy fact that the mother as well as the daughter, if they quarrelled with anybody, each transferred at once her affections to some other person. When, for instance, they quarrelled with one of the brothers, they used to transfer at once their attentions and affection to another brother, a servant, &c. The brothers were quite aware of this, and knew that the same fate awaited the beloved of the moment.

From her earliest years the patient admired the beauties of nature and art. Travelling in Italy, Tyrol, France, &c., she used to take long walks contemplating the views. Whilst at Munich she often went to the gallery of paintings, spending there many hours. All this contributed to make her pensive,

and seek for solitude. She liked to bury herself in her own thoughts.

Suffering from a chronic inflammation of the digestive organs, the patient frequently complained of feeling ill and languid. Her relations say that she became hypochondriac. Being of a loving and warm disposition, she fell in love four years ago with a young man who reciprocated her love; but the suspicious character of mother and daughter caused a rupture. It seemed to both women that the bridegroom did not love his bride sufficiently; that he wished to marry only for the sake of her money; that he had a mistress, &c. All this was pure invention, but the young man was rejected. The mental sorrows of the patient were somewhat soothed by constant travelling, but she became still more suspicious and distrustful, and at the same time superstitious. She fancied that she was "clairvoyante." The following circumstance was what brought this on. She saw as a vision a gentleman acquaintance riding on horseback; that the horse reared and threw him off, and that he hurt his forehead. The fall from the horse and the sight of the gentleman's face covered with blood caused a great fright to the patient, who shrieked. Her mother succeeded in quieting her, but the day and hour when the patient had this vision were noted, and soon after they learned from the sister of the gentleman in question that he had had a fall from his horse precisely on the same day and at the same hour. From this time the patient became convinced that she was "clairvoyante." She believed in fortune-tellings, chiromancy, &c., and was in despair when her forecastings were unfavourable.

In the meantime revolutionary movements had commenced in Russia, and amongst its victims were several of the patient's friends and relations. She became still more suspicious and exceedingly irritable. This was a year and a half before she became completely insane, and she got worse and worse every day. The patient suspected that the floor had been made double for some evil purposes by enemies, and that the servants put poison in her mother's bed. She feared to lie on the sofa, as she said that there was something wrong. She was particularly suspicious of her sister-in-law, who was a very amiable young lady, who did everything she could to please her. The sister-in-law accompanied the patient and her mother to Kiew, where they frequented very much society. The sister-in-law invited young men to her house, and endeavoured to find amongst them a husband for the patient, and in this she succeeded. A young gentleman made to the patient a proposal of marriage, and he was accepted by her. But very soon suspicions arose. Her sister-in-law was young and beautiful, and the young men used to pay their court to her. The patient fancied that she wanted to prevent the marriage, and angry words passed between her and her sister-in-law. The mother and daughter fancied that their relations were in the

plot. The bridegroom was rejected, and the patient grew much worse.

At this time the patient began to write a novel under the title "Lost Happiness," wherein she describes herself; but, unfortunately, in consequence of her illness, the novel stops where the heroine's childhood is described.

During the last years appeared the symptoms of the delusion of doubt. The patient used to rise several times to lock a door, and after having repeatedly ascertained that the door was locked, she nevertheless again had doubts of its being locked, and again rose. She could neither eat nor drink without fancying that the food was either of bad quality or was poisoned. She frequently had doubts of her having paid the tradesmen's bills, and used to go over and over to inquire. The patient was very fond of reading, and was in the habit of making marginal notes in the books which she read. She began to fancy that persons touched her books, which annoyed her, and caused her to wash her hands. Soon after she got into the habit of washing her hands on touching any object. When she took up anything she examined it for some time with disgust, and then either kept it in her hand with a feeling of restraint or threw it away in disgust. Whilst eating or taking anything in her hand she would always ask what it meant, or what it would lead to afterwards. As these symptoms only showed themselves at intervals they were not considered as pathological symptoms, and were attributed to extravagance and to her being spoilt. At the same time, the patient considered herself to be very ill, and drank a great deal of milk, and tried to get better, although she had an excellent constitution and was fairly stout. She complained of oppression on the chest and of retchings.

After having rejected her bridegroom in Kiew, the patient and her mother seem to have lost their presence of mind, and did not know what to do. They took several decisions without, however, carrying any of them out. They decided to go to Moscow, to the Crimea, to Nice, Petersburg, and came to Kharcow. Having a beautiful house in St. Petersburg, they hired rich apartments in Kiew, which they left to go into an hotel, and finally they set off travelling.

All these decisions were communicated to the brothers, who were requested to forward the ladies' effects to various places, and it thus happened that umbrellas were sent to Tatta, shoes to Moscow, a fur cloak to Petersburg, money to Nice, whilst the patient and her mother finally went to Kharcow. During the journey from Kiew to Kharcow the illness developed itself into an acute shape. When they entered the railway carriage the patient grew suddenly alarmed, and called out, "No, no! we shall not be well here. It is a bad carriage." They changed carriages, on which the patient exclaimed again, "We should have remained in

the first carriage, which was good. This is a bad one." The patient was agitated during all the time that the journey lasted. "There is a noise in the carriage. They meant to do something to us." She begged her mother at every station not to proceed any further as they were running to their perdition. During the journey she refused to take any nourishment, as everything was poisoned; so was the air, and every object surrounding her. She must not touch anything, nor must anybody touch her. There was something peculiar about the train which was specially destined to torture them.

They arrived at Kharcow. On their way from the station the mother related that the patient complained of everybody they met turning their heads away and looking angrily at them. On entering the room of a well-known hotel the patient complained that it was bad, and that there was a peculiar smell in it, and that it was poisoned, and that she must go into another room. In the same hotel lodged Count K., the patient's uncle, who offered to give up his own room, but she found that this room was also bad. Some misfortune or other must happen to them. She feared that she was going to die, and asked to see a doctor. Finally, I was called in.

On my examining the patient, I found the young woman to be tall, well-formed, fair, of a good constitution, and 29 years old. She did not remain quiet for an instant, walked about the room, and talked in a loud and agitated voice. She spoke abruptly, and repeated one and the same phrase, for instance: "What will become of us? what will become of us? what will become of us? What do you want, doctor? what do you want, doctor? Mother, do not leave me! mother, do not leave me!" &c. Sometimes these sentences were pronounced in a singing tone, sometimes they sounded like shrieks.

From the general aspect of the patient it was evident that she was in a very excited state of mind, proceeding partly from ideas of persecution and partly from an unaccountable torturing feeling of anguish. The patient was convinced that she, her mother, and her two brothers were threatened with some dreadful misfortune; they were first to be all tortured and then murdered. She ran every instant to her mother, looked into her eyes, kissed her hands, asked for her blessing as if they were going to be parted and she was ready to die. Everybody was plotting against them, everybody was a wretch and a persecutor. The carriages driving and the men moving about, even a dog crossing the street, implied something mysterious connected with her fate. Every movement, every look of bystanders had a peculiar meaning which the patient commented on, and which brought on an attack of fear. Since several days the

patient had not drunk anything, and she was tormented by thirst.

She took up with avidity a tumbler of water, held it in her hand for half-an-hour, but dared not drink, thereby aggravating the tortures of thirst. "The water is poisoned." The patient's tongue and lips are parched; a drop of water tastes bad to the patient, which confirms her in her idea that the water is poisoned. She eats nothing herself, and gives nothing to her mother to eat. She has not slept for several nights, and is constantly waking up her mother, as she is afraid that if they go to sleep they will never wake up again. The mother could not leave her for an instant. The functions of the intestinal canal had ceased since several days; she had retchings and nauseas. The urine passed seldom, and only in small quantities. It was of a high specific gravity and acid. The organs of senses were in a state of hyperæsthesia. The patient could hear a whisper at a great distance, and paid great attention when anything was whispered, and at the same time she did not seem to hear what was said in a loud voice close to her. The slightest contact, with any object, such as a hair or a feather, excited the patient. Suspiciousness and distrustfulness on the part of the patient reached their extreme limits. The train of ideas was in a disordered state—abrupt, and void of any system. The patient frequently looked at herself in the glass, and always found some changes in her hair, eyes, &c. She examined her hands, and found them also changed. She sometimes remembered certain events in her life and attributed to them a special meaning. She used to throw herself on her mother's things and on her own, hold them tight in her hands, as if she feared that somebody would take them away from her or that they were sacred objects. The pulse was feeble, 112 pulsations a minute; no fever. Menstruation appeared four days later than its usual time.

She grew still more agitated during the night. The following day she was troubled with the same fears, despair, and unaccountable ideas of persecution, the same dread of death, and of some dreadful event; the same doubts and fear of dirt and of touching anything, the indescribable state of anguish, which drove the patient into despair and made her burst into tears. The phenomena were the same, but had become more acute. During one of these paroxysms the patient put half her body out of the window, and screamed, "Help! There are women in the room No. 4 being murdered." At the same time she broke the lower panes, and it was with difficulty that she was removed from the window.

The next day the excitement of the patient had somewhat calmed down, but the delusion of doubt showed itself in a very marked and clear manner. All that she undertook to do she left undone twenty times, to begin over again twenty times. "Bring



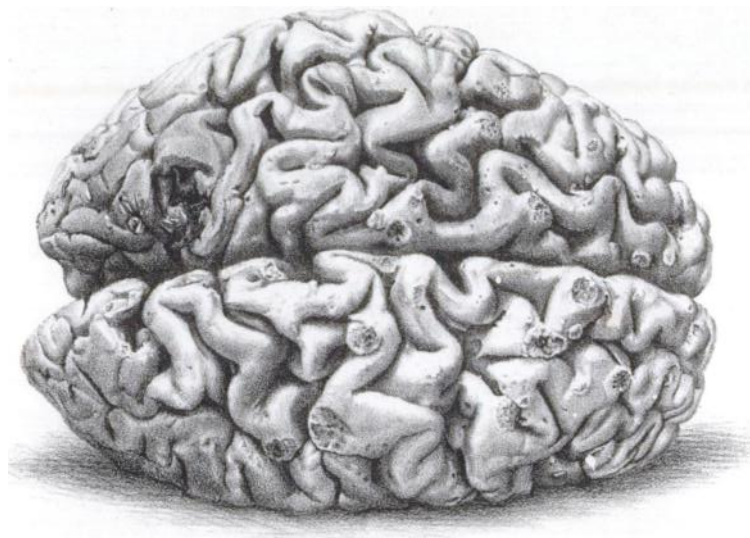
me some milk," she said; "I shall take it in bed." The milk is brought to her. "No, put it on the table." She walks up to the table. "Ah! why have I come here? I ought to have taken the milk in bed." She goes to the bed. "No, I must have the milk on the table," and so on. She takes a bath, puts in her right leg. "No, I must put in my left leg." She puts in her left leg. "No, I must put in my right leg," and so on twenty or thirty times over and over again. I went out driving with her in a carriage; she sat on the right and I on the left. "No," she said, "I shall sit on the right." We changed places. "No," she said; "why should you sit to the right and I to the left?" We again changed places, and so it went on. With all this, the patient suffered, trembled, cried, and is seized with fear that she did so and not so. It was only in my presence that those who surrounded her inspired her with a certain amount of confidence; it was only from me that she accepted any food. I fell ill, and for five consecutive days she refused to take any food; and it was only when my assistant threatened to feed her by force that she consented to eat, but until I recovered it was only from my assistant that she accepted any food. The delusion of doubt, which at times showed itself very clearly, gradually disappeared altogether, and was succeeded by a state of simple want of self-confidence, and a dread of every object and apparition. When she was calm she recognized the absurdity of her fears, but a moment after the same fears reappeared.

This state lasted nearly three months. Under the influence of a calming treatment appeared "*intervalum lucidum*." After a year I met her at Reichenhalle, and found her in the same state, but in which the "*folie du doute*" showed itself under a more acute form.

I allow myself from all that precedes to draw the following conclusions:—

1. That neurasthenia engenders neurosis in various forms and degenerative psychosis.
2. That in many cases the disease is limited to neurasthenia, but that in some, neurasthenia enters into a second stage, *i.e.*, elementary mental disorders.
3. That these elementary disorders either have a happy issue or enter the third stage—organized neurosis and psychosis.
4. That in exceptional cases, neurasthenia can engender pathophobia, which, in connection with uncontrollable obsessions, can degenerate into "*folie du doute*."
5. The delusion of doubt may appear in its pure form or in connection with other forms of degenerative psychosis, hypochondriacal delusions, &c.

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Multiple Sarcoma of Brain.  
*Reported by Dr Bullen*

*West, Newman & Co. Lith.*