A HUNDRED YEARS AGO

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THE EFFECT OF SUGGESTION ON NERVOUS DISEASE: TWO CASE REPORTS

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A PROFESSIONAL GENTLEMAN, with whom I frequently had business, suffered, being a big eater, from dyspeptic troubles for which I was able to give him relief, and he conceived thereby an exaggerated idea of my professional ability.

My invidious position

On one occasion he mentioned that his mother-in-law had been paralyzed in both lower extremities for six months, and on his last visit he suggested that I should undertake her case, dismissing her present medical attendants, who consisted of the family doctor, the leading obstetrician, and the foremost consulting physician in Dublin. It was with great relief I was informed that I was too young (this, alas, is over 30 years ago).

On other occasions on which he approached the subject I discouraged him, pointing out the lady was in the hands of two of the most skilful men in Dublin. Thinking I had finally settled the matter, what was my horror to find that he had carried his point, the other doctors to cease attendance and the case be taken up by me.

I told him this was most irregular and could not do so until I had the permission of the former doctors. I was all the time wishing myself out of what seemed a stiff proposition. This was not made more cheerful when they (the doctors) informed me I could do no good as the case was of advanced and, in their opinion, incurable paraplegia.

'Incurable paraplegia'

There being no way out, I went to see the patient next day. Mrs A. was a stout lady, about 45, who was the mother of a family of twenty, all alive. Her husband had met with some business reverses, and they had to give up their house in London. She stated her present condition came on gradually until she lost power of her lower extremities. In reply to my question, if there and then taken out of bed what did she think would happen, she said if she attempted to stand, her legs would give way and she would collapse on the floor. In every other way she was healthy. On examination, there was no atrophy or rigidity of the muscles; the knee-jerks, though faint, were present. Sensation was, as well as I can remember, not affected.

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Realizing that everything depended on a bold move on the chance of the present condition being, as I judged at the time, functional, I said, 'Mrs A., I will require of you two things: firstly, don't take any sort of medicine; secondly, permit a woman I will send to do something to your spine which I shall instruct her about. I shall return in a fortnight; if in that time you are not able to walk, I shall be more than surprised.'

The woman I sent was not a masseuse, a class who in my experience always make people out to be worse than they really are. Her directions were to percuss over the vertebral spines for 15 minutes, increasing the time gradually.

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The second case was that of a lady of 50, mother of six. She had been under treatment by a well-known obstetrician without improvement. Her history was similar to the former case and the result of treatment (if one may call it so) the same.

During a holiday in the United States I asked a friend who was pathologist at the Chicago University what could he make out of it. His reply was that in both cases there was a tumour either in or pressing on the central nervous system. The subsidence of the paraplegia was due to some other fibres supplying the motor power.

This was to me not convincing, for I could not associate so long an interval with the presence all the time of an organic lesion.

It would be interesting if we could follow up those so-called miraculous cures that take place at holy wells, etc., to see if sequelae occurred, as I believe they do in most. I should be pleased if readers of *The Practitioner* would give me experience of similar cases.

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