TUBERCULOSIS AND INSANITY.

BOTH INCREASED BY WAR DISEASE.

Recent reports of health officers and others call attention to the fact that tuberculosis is increasing. There are various explanations, but most of the ones which we have seen are vague and unsatisfying. At the same time, we are told from other quarters that insanity and functional nervous disorders are on the increase also.

So far as can be gathered, both these fears are justified by the event. The point that arises and must be considered is whether there is any connection between the two phenomena. Is the increase of tuberculosis due to the same causes as the increase of insanity? Or are the evils without relationship one to another?

Some time ago a writer who adheres to what, for convenience, is spoken of as the New Medicine, ventured to prophesy that both tubercle and insanity would increase after the war. He based his prophecy on the following considerations:

A vast number of men and women have in these last years become infected by diseases which from their nature are very difficult to eradicate. These diseases, which include malaria, dysentery, trench fever, the typhoids—in some cases—and venereal diseases, act as chronic poisons. The poisons probably exert a specific effect on the nervous system. The result is that the level of bodily expenditure on any given effort is raised and the victim tends to fall into a state of exhaustion.

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If he is not cured he remains in this state of exhaustion and exhibits marked neurasthenic symptoms, weakness, instability, mental weariness, and so on. Bit by bit the "margin of safety" which protects from disease, whether of the body or the mind, is worn away.

Now it seems to be the case that tubercle does not in most instances seat itself in a healthy soil. It tends to follow other infections when the resistance of the patient is low. It tends to ameliorate when the bodily resistance is raised against it.

REDUCED HEALTH MARGIN.

In the same way traits of mental instability, which may be hereditary or acquired, do not tend, as a rule, to show themselves until some secondary factor has reduced the margin of safety represented by health. In other words, at some given point of weakness and exhaustion, a man, apparently mentally sound, may uncover his predisposition and become insane. The healthy man is able by the exercise of his will to restrain the impulse which would unseat his reason; the sick man is not so able. The insanities of the puerperium may be taken as illustrations of this

Consequently the victim of war disease—and his number is legion—is more liable to attack than his uninfected neighbour. Tuberculosis and insanity may both assail him with a probability of success which did not exist before he fell a victim. He is, in a medical sense, a fortress the outer fortifications of which have fallen.

The matter is important from the point of view of pensions. In cases in which tubercle has begun since demobilisation the victim is entitled to an inquiry into his history during the war. If it is found that he is infected with a disease of war in addition to his consumption—and this is by no means as rare as might be thought —he is entitled to relief. The same thing applies in the case of insanity.—The Times, September 8th, 1919.

CARE OF DEFECTIVES.

ESTIMATES OF £1,660,000.

In a memorandum issued yesterday on expenditure likely to be incurred under the Mental Deficiency (Amendment) Bill, it is stated that it appears probable that if full use were made of the Act during the next five years provision should be made for the maintenance in institutions or under guardianship of about 21,700 defectives. It is estimated that the average annual cost of maintaining defectives in institutions will be about £60 a head. The total sum required, therefore, will

LX VI.