

may have added thereto absolute refusal of food, or even actual opposition to all efforts to induce the patient to eat. This, mayhap, from fear of being poisoned; an idea that he does not need to eat to sustain life; or a desire to commit suicide by starving himself to death. But, whatever the reason for the refusal of food, there is no disposition on his part to meet you half way, no effort to assist in any measures devised for his comfort or cure.

There is thus, as you can easily see, a vast difference between the two forms of nursing, a difference thus aptly illustrated by Dr. Cowles in one of his reports on the McLean Training School:—"A nurse of large experience in mental nursing, after a term of service in a general hospital, was asked what the difference was between the two kinds of nursing. She answered: 'In a general hospital, the patient must please the nurse; with the insane the nurse must please the patient.'"

Were I asked what, in my opinion, would constitute the ideal trained nurse, I would, without hesitation say: A thorough course of training in a hospital for the insane, followed by the regular hospital course.

As a rule, the insane can be much better cared for in institutions devoted exclusively to the treatment of mental disorders, than at home; but there are times when removal to such an establishment is for some reason deemed inadvisable. Consequently cases of insanity are liable, now and again, to be amongst those of which the ordinary sick nurse is asked to take charge. For this reason it is advisable that she should add at least some knowledge of mental nursing to her *repertoire* of accomplishments, a task in which I feel honoured by having been asked to assist you.

To render intelligible what I have to say about the nursing of the insane, let me first devote a brief space to telling you something about what insanity is, and the forms of the disease most frequently met with.

The fundamental principle of a mental nurse's education must be the fact that insanity is a disease; that insane acts and ideas as surely spring from a morbid condition of the brain as a bilious attack springs from a morbid condition of the liver. It is hard to realise that it is possible for a person seemingly well and strong, able to eat three square meals a day, and capable of moving vigorously about, to be sick, as is really the

case with the insane, and yet it is all-important that this fact should never be lost sight of. Very often the victims of disordered mind imagine that their best friends are their worst enemies, and frequently, under the influence of insanity, the most kindly and refined ladies become notoriously obscene, lewd, and irritating. Not rarely, too, we come across patients who, let the nurse be ever so kind, will persist in formulating charges of neglect, inattention, and even cruelty against her. To bear such charges with equanimity, knowing them to be utterly baseless, is one of the hardest tasks imposed upon the clinical nurse. It is only by the full recognition of the fact that such patients are sick, and not answerable for what they say, that this can be done. It takes a hard struggle, I grant you, to keep down the "old Adam," innate in us all, under such circumstances. It must be done, however, if you are to have any success in the care of the insane. Perhaps it may help you in the struggle if you will put it to yourselves in this light: I would never dream of taking to heart any of the absurd things said by a delirious fever patient, why then should I feel aggrieved at the remarks of an unfortunate lunatic, who is equally sick, and equally irresponsible for what he may say?

The general term "insanity" embraces a number of forms of mental disorder, and the question of an accurate definition of it has been much puzzled over. Even yet, alienists are not agreed upon one that will embrace all those who are insane, and exclude all those who are sane. Perhaps the simplest definition, and one as good as any, is that which defines it to be a prolonged departure from an individual's normal standard of thinking, feeling and acting.

As to the forms of the disease, I need only say that it will commonly present itself to you in one of four aspects. There will be a departure from the normal condition, either in the direction of depression, of exaltation, of enfeeblement, or of perversion. These constitute the four great forms of mental disorder to which the technical names melancholia, mania, dementia, and paranoia have been applied.

That a nurse's duty must differ greatly in the different forms of insanity will be obvious. If the patient should be depressed her manner should be brisk, and her conversation lively and pleasant, though not flip-pant. If, on the other hand, the patient be