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NOTES ON A SUGGESTED EXPLANATION OF THE ANOMALIES IN THE SITUATION REGARDING THE PREVALENCE OF ANXIETY CONDITIONS.

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Conditions of morbid anxiety have become everywhere commoner in recent years, and this is reflected in their prevalence in the Services. In assessing the possible influence of service life and conditions on their production this general increase outside the Services must not be lost to view.

The most widely held theory of the origin of a neurosis is that such a condition is the result of abnormal evolution of the sexual component of the libido, some portion thereof becoming fixed at an infantile level, thus leaving a weakened libido which may be unable to contend successfully with frustration and stress. In these circumstances the libido as a whole may regress to infantile levels, and infantile eroticism will then be expressed in terms of psychotic or neurotic symptoms.

Freud himself places neurasthenia and anxiety neurosis on a different footing to other neuroses and attributes them to somatic sexual disorder. However, different people mean somewhat different things by the term anxiety neurosis, and I do not think that such a causal factor as coitus interruptus is of importance in the majority of the cases recorded in the Army as anxiety neurosis.

I think that to most psychiatrists conditions of morbid anxiety suggest...
some underlying disharmony between the libido and the ego which weakens mental resistance to worry and stress.

The increase in morbid anxiety conditions referred to above is a phenomenon of this century which began to be apparent early therein. As far as the Army is concerned anxiety conditions were for practical purposes unknown at the beginning of the century. However, as the century passed through its opening years these cases began to appear and were becoming common before the late war and in countries unaffected by the war.

The explanation which is usually accepted as accounting in large measure for their causation in military cases is that military duties have tended to become very much more arduous and exacting in recent years and that anxieties in connexion with promotion in these days of economic stress are often acute.

There have been constant changes and reorganizations, and senior ranks, both commissioned and other, have to shoulder heavy responsibilities in connexion with big contracts and estimates and the custody and maintenance of valuable stores, etc. Long journeys occupying valuable time have to be undertaken on inspection duties and often under bad conditions of climate. All this is true enough and of much importance, but anxiety conditions, though naturally commoner among those thus severely tried, are so comparatively common now among officers and others with no great responsibilities, bachelors without family worries, etc., that the above factors become in considerable measure invalidated as a primary cause.

In some ways it is obvious that the military life remains, as it always has been, a sheltered one compared with many civilian callings. Its prospects may not on the average be brilliant, but are up to a point safe and permanent, immune from the current depression and insured against loss of employment as a result of even quite severe and prolonged sickness.

I think that on the whole it is felt that the prevalence is not quite to be explained by such considerations as the above, which seem incapable of explaining an accumulation of cases threatening to become an administrative problem. On the other hand, the man who develops morbid anxiety finds any work difficult and is liable to give an exaggerated account of its difficulty. However, in my experience, not a few of these cases admit that their work is not particularly difficult and is not a great anxiety to them.

Then there are other factors in the case. One of these is that this increase in these neurotic conditions has coincided with an increase in certain other conditions, both mental and physical. As regards mental conditions, the clinical aspect of psychiatry has changed in odd ways during recent years. Psychotic breakdowns have become commoner, but a considerable component of this increase has been composed of a new type of minor breakdown which deserves to be so called not because it is not acute but because it is evanescent and often seems to leave no ill-effects. In particular the number of mental breakdowns in young people has greatly
increased in this century. This trend in psychiatry has modified all considerations regarding prognosis.

Another point in the general question is that there has been a correspondingly great increase in congenital mental defect over the same period, and here again the degree of defect has often been slight. Rather a feature in this aspect of the case has been examples of neurologically determined defects such as congenital agraphia or alexia, in which the workshops of the mind seem to have suffered rather than the psyche. Such cases are now less of a rarity than formerly. They often seem pretty normal till education is attempted, when it is found that writing or reading or perhaps arithmetic cannot be normally comprehended. The education and prospects of such children is a sad problem.

Yet another factor to be considered is that this phase has coincided with the establishment of the endemicity of the septic focus. A school has arisen which believes that in the septic focus we have the prime cause of a considerable or even a large proportion of mental breakdowns. In these days we can almost always find something that will answer for a septic focus. But here again the septic focus was for practical purposes unknown until this century. In proof of this we need only consider the loss of teeth that is resulting from periodontal sepsis. In my own student days in the beginning of the century it was quite exceptional for anyone to lose so many teeth as to need a denture. Then in a sudden wave an international shedding of teeth occurred and countless millions of teeth were lost. There is no doubt that a focus of toxic absorption may precipitate a mental breakdown, or aggravate one, but there seems great doubt that the septic focus deserves the fundamental place in the etiology of the mental breakdown that some would allow it. On the whole, applications of this idea have not borne out the hopes that were entertained of it, the truth of the matter being that the mental and the septic focus are fundamentally related to a common cause rather than to each other.

One cannot know whether the average level of the health of the world fluctuates appreciably over long periods, but there seems to have been a sudden low tide in it in the early years of the twentieth century, which suddenly reduced us to a C3 world. We in this country are about to take this in hand and attempt to improve the health of the rising generation. This phase has been marked by a general lowering of health and poor resistance to infection. The result has been very suggestive of a gigantic "release phenomenon," to borrow a term from neurology. Immunizing control has become weakened with the result that pathological processes due to infection have been free to evolve into mystery illnesses in men and animals, to violate age limits, to achieve intractable endemities and to blur the outlines of clinical medicine in ways which contrast with the orderly establishment of infective illness within some of our memories. One of the earliest recorded manifestations of this new phase creating an administrative problem was the intractable endemicity of tonsillitis in
certain barracks and other military institutions in this and other countries some thirty years ago. The new endemicity of foot and mouth disease in cattle began at the same time and has proved a great economic problem ever since. The world endemicity of rheumatism which is the result of defect in the resistance to infection began at the same time and is of the same etiology, as indeed is the prevalent periodontal infection already mentioned.

A new disease which seems to be obtaining a similar hold is of interest in connexion with the neuroses; this is the mystery hysteria of certain animals, notably of dogs, and which is a problem for those concerned. In mild examples of the illness the dog exhibits symptoms of sudden causeless panic and runs headlong in terror, dashing itself into anything in its way, or attacking those who approach. Recovery may follow without apparent ill-effects, but in the severer cases the illness leaves reduction of intelligence and a kind of canine dementia. I believe that the pathology is obscure, but the illness is thought to be due to some virus infection. I have no wish to suggest that anxiety conditions in the human subject may be due to some infective condition of the brain, but it is an interesting fact that many psychotic symptoms can be produced by drugs, for example those of schizophrenia, catatonia, paranoia, melancholia, etc., and there is a school which believes that mental disorder is the result of toxic effects on the brain.

I think it is very probable that the resistance of the brain tissues has suffered during this phase. Should any difficulty with the insulation of the emotions result then the stage is set for the appearance of anxiety conditions which will be precipitated by circumstances which should normally be successfully dealt with.

As regards extraneous situational factors in the etiology I am inclined to think that worry over ill-health almost deserves a place alongside the other worries quoted.

These views can be summed up in saying that so much of the resistive resources of the body is constantly on call to combat the present low tide in world health that some general exhaustion results which is very liable to be among other things reflected in defective mental resistance.

If there is any truth in these suggestions this seems more likely to be appreciated by those whose memory of the study of medicine goes back thirty years or more than by those whose memories cover only the period of the present phase, which is obscured by an element of relativity in that: the ill-health that is being commented on in different countries is really universal, and so unable to be estimated by contrast with some contemporary healthier standard. The long memory could I think read the signs of this low tide in the resistance to the infective process in many departments of medicine, and, actually it has come to be appreciated that there is something amiss with the health of the nation; it does not seem to be fully appreciated, however, that this failure of health is worldwide.
I believe that the present failure is terminating, that the end of the century may see a return to a normal level of world health. It seems impossible to form any opinion as to whether any such dramatic ebb in the general level of health has ever occurred before, or whether anything similar is likely to happen again and at what intervals. It seems the irony of fate that this phase should have coincided with a falling death-rate over the same period in civilized countries, and the actual halving of it in some. It is, however, only the latterday advances in medicine and surgery that have prevented a considerable increase in the death-rate.