

“The interaction of physical and psychological factors in the causation of
neurosis in children.”

Lecture to The London Association of the Medical Women’s Federation

At British Medical Association House,

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The original copy was heavily damaged and in some areas illegible, so I have converted certain paragraphs as best I can.

If one looks for the word neurosis in the index of a text book on children’s medicine, it is not to be found in that form. Under diathesis the neuropathic diathesis will be found, in some books neurasthenia, and in many ‘bad habits’ or neuropathic habits, but the plain term neurosis or neuroses is not used.

Under neuropathic diathesis, then following occurs:

“It causes the product of both hereditary conditions as an environment in which he lives, the child is nervous by inheritance. This is rendered much more so by continual association with nervous parents, especially if, being an only child, he is the object of their undivided solicitude. Acquired nervousness is by no mean infrequent as the result of disease on bad environment, but is lost as soon as the influence that is responsible or it is removed.....

Neurotic children are almost always poorly nourished. They have labile vasomotor systems and for that reason blush readily and very often have cold hands and feet.”

Hysteria - following any of the lines of adult hysteria.

The existence of a bad habit is a sign of neurotic temperament."
and the recommendations for treatment in nearly all cases is a removal to a different environment.

On the other side, children come before the court's ad delinquent, and teachers complain of certain children as unmanageable and unteachable. Unless definitely certified as M.D. the question of health is not regarded..

From the side of clinical medicine, therefore go have the aspect of the child regarded as the seat of disease, and study of this disease in him. Under this heading the neuropathic child is an evidence at heredity or of diathesis, and there is no doing very much for him.

From the side of education we have the criminal or the unmanageable child as an example of failure of morality, or of purely psychological disasters.

I want to put before you tonight a different view of this position from either of these. The experience from which I am speaking is drawn from private work, and from cases seen at the Childrens Clinic for the Observation and Treatment of Nervous and Delicate Children.

Now in considering the question of children's phenomena, certain points stand out immediately where conditions in the child differ very markedly from those in the adult.

1. His incompleteness. Everything in a child is a state of being about to become. As soon as this ceases, he ceases also to be a child. His mind and his body are in a state of flux of movement, of development out of what they are into what they are about to be.
2. Vagueness of Outline. As a result of this there is at any one point a vagueness of outline of any particular feature. One cannot tell exactly what size within; ought to be, and what strength any single function should have at a given age and in a given individual. It is a cross section through an army debouching to an end, with each section at a different level.
3. Much Closer Interlocking of Mind and Body than in the adult as a result of this. For instance the development of power of attention, and its effect on the the development of the special senses.

The adult has a fixed relationship to society, the child a constantly changing one. For the child nothing is the same for two months together. The relationship of himself to his world and his world to him changes all the time. What was denied him yesterday is permitted next month, and what last year was thought cute, today in a misdemeanour.

It is out of these facts that neurosis arises, and I want to put before you some of the mechanisms by which this takes place.

I am not going to deal with disease. and the specific effects of disease, because that belongs to the text books, but I want to show you that the neuropathic child is not the child who necessarily has a neurosis, and that physical and mental conditions can on the contrary result in neurosis in children to which no description of neuropathy could apply, and yet who can suffer very severely from them.

Let us enumerate first of all some of the conditions of this kind which will meet us.
(Catalogue of complaints from Report)

These were the complaints made by patient's mothers of children referred to the Children's Clinic for last year.

Now each of these complaints can arise from a physical or from a psychological ground, and many from a combination of the two.

Let us take it from the physical angle and consider just the transient conditions. (I am going to select one or two factors as typical of each class)

1. Let us take first the question of the biochemistry and consider the acid base balance of the body tissues.

The normal metabolism of children is very much more unstably built than that of adults, and much more easily upset. A slight shift to the acid side, that if it occurred in an adult would produce a sense of depression or an occasional disinclination for food, in a child will give vomiting, diarrhoea, fretfulness, night terrors, lack of sleep, wasting and all the picture of a condition of cyclical vomiting or an appendicitis.

The psychological accompaniments are irritability, weepiness, manageableness, loss of appetite, and lack of sleep.

It is well to think of the free fixed acid urine ration whenever a child like this comes one's way.

2. Posture. We had the privilege a short while ago of hearing Miss Forrester Brown describing the importance of the consideration of posture. It is well to lay a good deal of stress on this in the child.

The depressed child stands droopingly with every line of the body showing his depth of positive self feeling. On the other hand the vitamin starved child, the child with too little calcium, with too little iodine in its tissues, droops from fatigue, and as James Larye pointed out, the posture of depression induces very shortly the mood appropriate to it, and fixes this discouragement in the child's mind.

To remedy the physique in these two cases is very largely to remedy the psychological manifestation as well.

The same is true of Special Sense Defects. These can be the turning point of the whole of a child's life.

Frances Vincent.

For the Permanent Factors

Stature Too tall- Conspicuousness
 Too small- lack of limelight (parallel with deafness)
 If illness brings limelight- clings to this.

Physical Peculiarities Red hair etc.
Endocrines Plain fatness
 Actual defects - dyspituitatism

Taken the Other Way

Tics - George Woodger

Dist, Scabies, etc- Joyce Day, Joan O'Connell

Enuresis- Harry Mills

Insatiable Deprivation sense leads to Picou, which leads to constitutional weakness.

Depression leads to lack of resistance, which leads to colds etc .,

Must attack from both angles