

WORK-IN-PROGRESS (JULY 13, 2014) PARALLEL CHART FOR

Chapter 10 — Neurasthenoidia, or Near-Neurasthenia

from *Worry and Nervousness: Or, The Science of Self-Mastery* (1914)

by William S. Sadler, M.D.

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Sources for Chapter 10, in the order in which they first appear

- (1) Dr. Roger **Vittoz**, *Treatment of Neurasthenia by Means of Brain Control*, Translated by H. B. Brooke (New York: Longman, Greens, & Co., 1913, Second Edition)
- (2) Joseph **Collins**, *The Way with the Nerves: Letters to a Neurologist on Various Modern Nervous Ailments, Real and Fancied, with Replies Thereto Telling of Their Nature and Treatment* (New York: G. P. Putnam's Sons, 1911)

Key

- (a) **Green** indicates where a source author (or earlier Sadler book) first appears, or where he/she reappears.
- (b) **Yellow** highlights most parallelisms.
- (c) **Tan** highlights parallelisms not occurring on the same row, or parallelisms separated by yellowed parallelisms.
- (d) An underlined word or words indicates where the source and Sadler pointedly differ from each other.
- (e) **Pink** indicates passages where Sadler specifically shares his own experiences, opinions, advice, etc.
- (f) **Light blue** indicates passages which strongly resemble something in the Urantia Book, or which allude to the Urantia phenomenon.

Matthew Block
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X: NEURASTHENOIDIA, OR NEAR-NEURAS- THENIA

10:0.1 IN THE beginning of our study of the neurasthenic states proper, we must lay down the principle that all these neurotic conditions rest upon a definite hereditary base, and are specifically due to some form of abnormal brain working or nervous functioning.

BRAIN CONTROL (Vittoz 1)

DEFINITION OF BRAIN CONTROL (Vittoz 3)

[contd] Brain control may be defined as a faculty which is inherent in a man in a normal state of health,

and keeps the balance between his two brains.

When we speak of normal brain equilibrium we mean that every idea, impression or sensation is controlled by reason, judgement and will,

that is to say, that these can be judged, modified, or set aside as required (V 3).

Lack of Brain Control (Vittoz 4)

[contd] It is easy to imagine the state of one lacking this regulating faculty;

his uncurbed brain would, without a controlling power, be indeed in a state of anarchy.

A prey to every impulse, subject to all fears,

10:0.2 Brain control may be defined as a faculty which is inherent in men and women who are in a normal state of health.

When we speak of normal brain control we mean that every idea, impression, or sensation is controlled by reason, judgment, and will.

It is easy to imagine the state of one who lacks this controlling power;

his uncontrolled brain would without this regulating power, be practically in a state of psychic anarchy,

a helpless victim

and an easy prey to every impulse, emotion, and passing fear;

SOURCE

unable to reason or weigh an idea,

forced to receive all the impressions of his subjective brain,

he is nothing but a wreck, doomed to a life of suffering (V 4).

[contd] Complete lack of brain control is exceptional among the cases with which we are now dealing;

what we find more frequently among neurasthenic persons is insufficient or unstable control (V 4).

Insufficiency or instability of control (Vittoz 5)

The sufferer will judge and reason in a normal way,

and will nevertheless be dominated by ideas and impressions which he himself recognizes as absurd or exaggerated,

and over which his will has no power;

this is the typical neurasthenic (V 5).

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quite unable to reason sanely and soberly.

Such an individual is doomed to a life of sorrow and neurasthenic suffering.

Entire lack of brain control is exceptional;

what we find more frequently among neurasthenic persons is a sort of unstable or insufficient control.

Three forms of ennui or neurasthenoidia may be recognized, viz., the hereditary, the acquired, and the accidental forms.

10:0.3 The patient will judge and reason in a normal way respecting many things,

while at the same time he is peculiarly dominated by certain ideas and impulses which he himself recognizes as quite absurd or greatly exaggerated,

and over which his will has little or no power of control;

this is the neurasthenoidic state.

This same mental state carried one step further results in the typical neurasthenic state with all its accompanying physical manifestations, bodily symptoms, and psychic tortures.

**EFFECTS OF INSUFFICIENT
BRAIN CONTROL**

[contd] The phenomena of instability of control are in the main the same;

in fact, the sufferer's state of health is continually changing from good to bad,

and that for no evident reason.

These changes recur from time to time;

a gay mood may, for instance, be succeeded by a fit of depression,

and, whether it be his health, temper, or ideas, all are subject to great variation (V 5).

EFFECT OF INSUFFICIENT BRAIN CONTROL ON THE IDEAS, FEELINGS, AND ACTIONS (Vittoz 6)

[contd] Let us now see the effect of insufficient control on the ideas, feelings and actions (V 6).

It is very evident that even if the insufficiency be little marked,

a vague discomfort will be caused by the patient by the feeling that he is not cognizant of some of his ideas,

or that he cannot define them clearly enough.

10:1.1 The phenomena of instability of control are in the main the same

in neurasthenoidia as in out-and-out neurasthenia.

The sufferer's state of mind and health is constantly changing from good to bad,

and going from bad to worse,

and all this takes place without the slightest evident reasons.

These changes recur from time to time;

a frivolous mood may, for example, be succeeded by a marked fit of depression.

10:1.2 Let us now see what are the effects of this insufficient brain or mind control on the ideas, emotions, and actions.

Even in those cases where the insufficiency of control is very slight,

a definite and marked discomfort will be caused the patient by the feeling or conviction that he is not fully cognizant of all the ideas hatching out in or passing through his brain.

SOURCE

He is also often troubled and even distressed by a feeling of being only half awake

and in a sort of half-dreamy state from which he cannot escape (V 6).

[contd] If the insufficiency is more developed, the symptoms increase proportionately;

he no longer suffers from a vague feeling of discomfort,

but from a sensation of painful confusion,

or a whirl of unconnected and uncontrolled ideas (V 6).

[contd] The uncontrolled idea will therefore always be unconnected, less defined, and less clear;

it may be repeated indefinitely,

or be, so to speak, fixed in the brain

and independent of will control (V 6-7).

[contd] The chief defects of insufficient brain control are exaggeration or deformation of the ideas,

also a want of preciseness and clearness (V 7).

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He will often be troubled and harassed by a vague feeling that he is only about one-half awake,

that his mind is getting away from him—

that he cannot escape from the half-drowsy state of mind which ever and anon threatens to creep over him.

Helpless—he is carried by this uncertainty out on the sea of fear.

10:1.3 If this insufficiency is more developed, the symptoms increase proportionately;

he no longer suffers from a vague feeling of discomfort,

but from a sensation of painful and distracting confusion,

a veritable whirl of disjointed and uncontrolled ideas.

10:1.4 These uncontrolled ideas are usually found to be unconnected and indefinite.

They may be repeated indefinitely,

or may be come so fixed in the mind

as to possess the power to torture the patient

quite independent of will control.

The chief defects in the thinking of these neurasthenoidic patients are exaggeration or deformation of their ideas and emotions;

also a woeful lack of preciseness and clearness.

SOURCE

The actions have the same defects.

They are indeterminate, seldom considered,

and always performed in a semi-conscious condition (V 7).

He is only dimly aware of all these results of insufficient control over his ideas, feelings and actions,

and he accepts them without realizing that they are nevertheless the origin of the most distressing symptoms of his illness (V 7).

IX: ENNUI (Collins 129)

[INTRODUCTION] (Collins 129)

One reason why the comparatively poor are generally so much more contented than the rich, is that

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The resultant bodily actions have the same marked defects.

They are indeterminate,

hesitating,

and frequently executed, apparently, while in a semi-conscious or dreamy state of mind.

10:1.5 The patient is only vaguely aware of the results of all this insufficient control over his ideas, emotions, and actions;

he dimly recognizes the consequences of his demoralized mental actions

without realizing that they constitute the origin of the majority of the most distressing symptoms of his unique affliction.

ENNUI AND NEURASTHENOIDIA

10:2.1 Thousands of well-to-do people are suffering from the accumulated results of intellectual inactivity and physical idleness. They have become the victims of a sort of refined laziness—a conventional stagnation of mind and a fashionable inaction of body.

10:2.2 One reason many poor people are relatively happier than the rich, is that

SOURCE

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they still have so many things to seek for; and **eagerness** is one of the most forceful and uplifting attributes of human mental action.

the very fact of **possession destroys most of the pleasure** in a desired object.

Possession not infrequently spoils the pleasures experienced while pursuing the coveted treasure.

Those who have not, are **eager** and work for the thing they imagine they want, and the very energy they put forth in striving for the coveted object acts as a healthy stimulus to life (C 129).

10:2.3 While much of the neurasthenia of the poor may result from the hereditary predisposition plus the stress and strain and worry of poverty; it must be admitted that the neurasthenoidia of the rich springs from the same hereditary taint plus the ennui of mental indolence and physical idleness.

NEW YORK, January 7, 1909.
MY DEAR DOCTOR:— (Collins 131)

10:2.4 I was recently consulted by a woman who, when writing to make the appointment, said in her letter that

My life is not over at forty-three, is it? If it is not, it is rapidly **becoming** an **unsupportable** burden. Is nervous prostration staring me in the face, or am I threatened with insanity? (C 138)

she “was living a life which had **become unbearable**,”

and that she “must have speedy relief or else

[contd] I must tell you that recently I have often thought I was **going mad** (C 138).

go mad.”

SOURCE

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[*Doctor's Reply:* In your own case, judging from the account you have given me, it would appear that you have had exceptionally good health (C 143).]

My rest at night is so much broken that I awaken in the morning unrefreshed in mind and body, weighted with the leaden anticipation of another day (C 136).

My husband often says to me, "What more do you want than you have—a **luxurious home** in winter, a veritable summer palace,

motors, horses, trained servants, all the money you care to spend, every wish gratified? ..." (C 135-36).

[*Doctor's description of her:* She has lost, or has overlaid with selfishness, her capacity for keen enjoyment, and cannot take an **interest in her family** or in the ordinary affairs of life (C 129).]

This patient when she arrived was found to be

in excellent—almost perfect physical condition,

even the blood-pressure was 120—normal.

The only possible physical complaint she was entitled to make was that, possibly,

she did not sleep soundly.

10:2.5 This woman had a devoted husband, two splendid children,

a **luxurious home**—

with **motors, horses, and servants**—

in fact, everything that money could buy, and yet she began her history by saying: "To me, life is not worth living. I am thirty-eight years old, and I feel that it is useless to live longer."

10:2.6 She seemed to have lost all **interest in everybody and everything—not excepting her own family.**

SOURCE

It is true that religion as generally understood has made no appeal to me; but a beautiful sunset, a strain of music, a line of poetry, would put me at peace with all the world (C 137).

Meanwhile, in spite of his essential goodness, I am beginning to find my husband's society excessively distasteful ... (C 134).

People still appeal to me, but they do not enthrall me, and secretly I have a contempt for them in their readiness to bow the knee to convention and tradition (C 136).

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She said religion no longer appealed to her,

that reading was distasteful,

and that her husband had "become a perfect bore."

She appealed to me to know if she was really going crazy, and if I thought not, then about how long would she live and have to endure "this exquisite torture of living in a world where nothing fascinates you,

nobody enthral you,

and everybody and everything bores you."

BREAKING THE SPELL

10:3.1 This good woman presented a typical case of neurasthenoidia. She lacked many of the symptoms of a typical neurasthenia, but she had every earmark of typical ennui—neurasthenoidia. If she is not promptly rescued from the mildew of her inaction and from the maze of her selfish indolence, she is on the high road to full fledged and unmistakable neurasthenia—genuine and unadulterated nervous invalidism.

SOURCE

NEW YORK, June. 1, 1908.
MY DEAR MADAM:— (Collins 139)

[contd] You mistake **ennui** for **disease**
(C 139).

[Compare C 130.]

You are in search of **happiness**, not health
(C 139).

Your life has been one of **self-indulgence**
and lack of discipline (C 139).

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10:3.2 Now, how did I talk to this patient? What did we try to do for her? The very first thing I endeavored to do was to disabuse her mind of the thought that she was “sick.” I fully and carefully explained that

ennui and even fully developed neurasthenoidia were not real “**diseases**” in the sense she understood—

that her condition was largely the result of neurotic heredity, luxurious environment, faulty education, lack of training, and more in particular a loss of the sense of one’s personal responsibility to the world. Of course, I did not neglect to show how all this had come about from her false ideas of happiness and how they were obtained from idleness and inaction on the one hand; and a gradual weakening and almost complete loss of will power on the other.

She strongly resented my statement that

she had “come to me in quest of some new secret or source of **happiness**”—

and greatly objected, at first, to my diagnosis that

“narrow-minded **selfishness** was at the bottom of all her afflictions.”

SOURCE

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10:3.3 It was only after a pointed, spirited, and searching appeal that she confessed to the sordid motives which had actuated her life from its earliest years, and then, after unburdening her soul—after bringing forth a series of

[*Her Letter*: ... in writing to you I am moved chiefly by a sense of duty to myself. I feel also that **confession** is good for the soul ... (C 131).]

confessions long suppressed—

confessions of failure in her duties as a mother, a wife, a neighbor, and as a woman,

I say that it was not until after this awakening that we were able to begin that long and tedious educational process which promises to effect deliverance of the soul from its lone and dreary prison house of self.

LIBERATION OF THE SOUL

10:4.1 Not all cases of submerged personality and imprisoned soul can be dealt with alike, but the following summary of my methods will be found adapted to the average case.

10:4.2 1. I give careful and conscientious attention to any real, bona fide physical condition which may demand treatment; taking care not to allow the patients to receive any unnecessary attention or treatment which would tend to dignify the thought that they were suffering from some real disease.

10:4.3 2. I try to show them what real happiness is—and how it is obtained.

SOURCE

[He who gives up the lesser happiness of selfishness, gains the greater happiness of unselfishness (James Allen, *Light on Life's Difficulties* [1912]), p. 29.]

You apparently believed that happiness was to be found by increasing your wants and by endeavouring to satisfy them,

whereas in reality happiness is found by restricting one's wants (C 140).

We should seek happiness in active life devoted to some absorbing work, or in endeavouring to develop those emotions or intellectual tastes which are the fruit of the proper cultivation of our capacities and our endowments (C 140).

Have you ever, not as an academic inquirer or philosopher, but as a mere average woman, asked yourself the object and aim of life? (C 140)

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I point out

the unhappiness of selfishness and the happiness of unselfishness.

I make plain that

to increase one's wants

is to decrease one's happiness;

while to decrease the wants means to increase the capacity for happiness.

10:4.4.3. The demand is imperative that the patient

go to work immediately.

“Get a job” is the first curative slogan in the therapeutic battle with ennui.

You must get hold of

a definite aim in life.

You must work and think and plan to this one great end.

SOURCE

We appear strenuous, but it is only our great effort to escape boredom. We are fearful lest we should have a few minutes or hours during which we may be obliged to think (C 141).

What have you ever done for your family, for the community in which you live, for society,

aside from an occasional “giving in” to your husband,

or such sacrificial offering as a fancy-dress ball, a musicale,

or a check to Salvation Army, rescue mission, or hospital?

I venture to say that you have never experienced a thrill from such conduct. Such delightful possession might have been yours had you ever done a truly unselfish act.

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Then you will not find yourself “bored”

if you are left alone with yourself now and then—

when you are momentarily deprived of something to entertain, occupy, or amuse you.

10:4.5 4. You must learn to think less about yourself and more about other people—the world. Begin at once to bestow upon your family and neighbors the great love you have so long lavished and squandered upon your miserable and unhappy self. The more you love yourself—the more your misery; the more you love others—the happier you are.

10:4.6 What have you ever done to make some one else happy?

I do not want to hear about

“giving in to my husband,”

the charity ball,

or a check to the Salvation Army.

SOURCE

To bestow something which costs us nothing

may benefit the recipient, but not the donor (C 144).

[See C 144-45 re advice to help poor families or “erring women.”]

[We in this country are so new to the game of life as it exists ... (C 141).]

Have you ever proved yourself a true helpmate to your husband in any crisis of his business life,

and won his gratitude by your loyalty and devotion? (C 145)

[*Her Letter*: Nervous and sensitive as I am to discordant sounds, do you wonder that when [my husband] comes clumsily or noisily into the room and sings, or whistles or yawns, I feel as if I should scream? (C 134-35)]

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Such gifts—which cost you little or nothing—

may indeed benefit the recipient, but they do little good to the donor.

Go right out in the great wide world and personally and actually do something for some really needy and stricken soul,

and you will be thrilled and exhilarated with a new satisfaction—a new brand of pleasure and happiness—which all your former and perfunctory “charity” acts never approached.

10:4.7 5. Get into the game of life with your husband (if you are a married woman).

In every crisis of his life stand with him shoulder to shoulder on the firing line.

This is an experience which develops that domestic patriotism,

family loyalty,

and that superb comradeship which makes husband and wife one—

and which effectively destroys that silly bugaboo of “boredom” so frequently felt by you when in the presence of,

and when so annoyed by the trifling eccentricities of your companion.

SOURCE

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10:4.8 6. If love cannot budge you, if affection does not draw you forth and away from yourself, then let duty push you out—literally shove you out—into the world to begin the activities which shall fulfill the divine destiny ordained for you, while your soul is filled to overflowing with the satisfaction and consciousness of having “done your best”—“having done your duty.”

You might devote some of your time, and all of your energy, to the establishment of a **hospital** for the treatment of the demi-poor, ill with so-called “functional” nervous diseases and the curable mental diseases (C 145).

Build a **hospital**.

Do you realise that the problem of **child labour** in the cities of this country, and especially in the large cities, is one that urgently awaits solution? (C 146)

Get a law passed against **child labor**.

Do something to improve the condition of the present generation, or to increase the prospects for happiness in the next generation. Find a hundred other idle sufferers like yourself and organize a movement which shall contribute to the solution of some world problem. Do something worth while; don't feebly push along some trifling and sentimental pseudo-reform propaganda.

Had you the slightest wish to protest against the enactment of a law to **prevent humane vivisection**, when it was read before the Legislative Committee last year in Albany? ... Many kindly but misguided people would stop this by the enactment of laws which forbid such experimentation (C 145-46).

Don't simply join an **anti-vivisection** society

or some other useless and harmful movement.

Seek out a woman's job—or a man's job—and take hold of it with a determined will.

10:4.9 7. Then, after you have learned how to work, after you are initiated into the joy and satisfaction of productive labor, you may find an entry into the joys of play and the pleasures of well earned recreation.

Yes, I know

You may say that such counsel as I have to offer might have been of assistance had you received it twenty years ago,

and you may think that the plastic stage of your life having passed, it is too late for you to avail yourself of it;

but I think otherwise (C 147).

you are about to say that all this advice would have been all right fifteen or twenty years ago,

that it is too late to remedy things now.

But I also know that it is not too late.

I know you can do it now if you will set about it with resolution and perseverance.

Breathe upon the smouldering fires of your sleeping ambition and see if the flames will not kindle and burn with such fervor that your dormant soul will be warmed into action and your mind inspired to exertion.

10:4.10 The further treatment, physical, mental, and moral, of ennui or neurasthenoidia, will more appropriately be presented in succeeding chapters in connection with neurasthenia proper, and will not, therefore, be further taken up in this chapter.

Neurasthenoidia is merely the vestibule to the fully developed nervous prostration, and is given separate attention here because of the fact that a large number of sufferers seem never to progress much beyond this phase, or else they so long linger in this pre-typical neurasthenic state as to deserve specific remedial suggestions.

SUMMARY OF THE CHAPTER

1. Brain control is the secret of sound nervous health. Lack of brain control plus hereditary pre-disposition means neurasthenoidia—psychic anarchy.

2. We recognize three classes of ennui or neurasthenoidia—the hereditary, the acquired, and the accidental.

3. Lack of brain control in its earlier stages is characterized by mental uneasiness, nervous discomfort, distracting confusion, fixed and disjointed ideas, fleeting memory, and the constantly recurring feeling that one is only about half awake.

4. The chief mental characteristics of neurasthenoidia are exaggeration of the emotions, deformation of ideas, a de-ranged sense of proportions, together with a woeful lack of preciseness and clearness.

5. The chief bodily symptoms of neurasthenoidia are general physical indisposition, muscular weakness, undue hesitation and halting in the execution of physical movements, resembling one's conduct in a semi-conscious or dreamy state.

6. Neurasthenoidia and ennui are frequently the result of intellectual activity, physical idleness, moral indolence, and social laziness—a general stagnation of mind, body and soul powers.

SOURCE

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7. Some pathetic victims of ennui are so bored by everybody and dissatisfied with everything simply because they are wholly self-centered—wickedly selfish.

8. In order to cure such patients it is necessary to point out the acting causes of their difficulty, viz: neurotic heredity, luxurious environment, continuous idleness, faulty education and the loss of the sense of one's personality responsibility to the world.

9. In liberating these victims of fashionable ennui, it is necessary to recognize and properly treat any accompanying physical disease or disorder.

10. The neurasthenoidic must be taught the unhappiness of selfishness and the happiness of unselfishness—that to increase one's wants is to decrease one's happiness and vice versa.

11. It is imperative that these patients go to work—"get a job." They must acquire a definite and continuous aim in life.

12. Neurasthenoidics must cease to think of themselves and enlist in the thrilling and exhilarating business of making other people happy.

13. If love cannot persuade the victims of ennui to begin action, then let a sense of duty drive them into the "game of life."

14. We have seen many of these victims of inaction speedily cured by enlisting in some local crusade or joining a national movement, such as building a hospital, child labor, votes for women, etc., etc.

15. It is never too late to mend, never too late to breathe upon the smouldering fires of sleeping ambition, and thus to

[But the great problem of religious living consists in the task of unifying the soul powers of the personality by the dominance of LOVE (UB 100:4.3).]

warm and arouse dormant soul powers to creative action.