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NEURASTHENIA AND RELATED PROBLEMS

1. ETIOLOGICAL PROBLEMS OF NEURASTHENIA

Neurasthenia is a disease with a long history. In Chinese ancient medical literature one can find descriptions of syndromes related to neurasthenia. Modern research on experimental neurosis also proved that in the face of either natural catastrophe or an artificially produced life situation, animals might suffer from similar disorders. Although William Cullen for the first time included neurosis in his classification of disease in 1769, and George Beard published his famous monograph on neurasthenia in 1869, it does not mean that the disease neurosis or neurasthenia appeared for the first time at this period of human development. The occurrence of neuroses and psychoses can be traced to perhaps the first existence of mankind.

It has been estimated that about 10 percent of the general population has two characteristic features in the functioning of their nervous system: 1) overexcitability — having a low threshold of reaction to and hypersensitivity in response to weak stimuli; 2) easy fatiguability — being easily exhaustible, weary, asthenic. These two characteristics are inter-related. If one is more hypersensitive and over-reactive to multiple weak stimuli, it follows that one is likely to use larger amounts of metabolic substance or energy in responding to them and thus, as a consequence, become easily fatigued. As a result, one develops inattention, poor memory, and a decrease in the capacity to think clearly and for a prolonged duration. These are precisely the symptoms of neurasthenia, which is attributed to functional exhaustion of cerebral cortical neurones.

Certain personality characteristics are exhibited by many neurotic patients in their childhood or adolescence, including asthenic and listless traits, insecurity, indecisiveness and rumination, or suggestibility and moodiness. It is based on these traits that neurosis later develops as a disease under environmental stresses, especially during puberty when emotions and the vegetative system are usually found to be unstable. For this reason, certain scholars claim a constitutional origin for neuroses, regarding the manifestation of neuroses as only an exaggeration of original personality traits. Thus, neuroses are considered as the product of personality development. Neuroses and psychopathic personality used to appear in the same chapter, as seen in The Textbook of Psychiatry by Mayer-Gross. According to this point of view, a person of neurotic constitution is vulnerable in social life, with the slightest stress of a life event resulting in social breakdown. Everybody without exception experiences happiness or misfortune, such as childbirth, senescence, sickness and death, in his or her life.

These life events hurt persons with neurotic constitutions most, resulting in the development of neurosis.

Another school of thought emphasizes life events as the main etiological factor of neuroses. In this view, constitution only means vulnerability, and vulnerability and disease are viewed as quite different matters. The fact that symptoms of neuroses occur under stress and remit after the elimination of stress indicates their reactive nature. Following this viewpoint, neuroses are lumped in the same chapter with reactive or psychogenic disorders, as seen in the textbooks of Giliarovcki or Popov.

Since each of these two opposing views has its own valid reasons, the two are incompatible. A third school of thought has put these two forms of neurosis together in a single category, while keeping each as a sub-type, i.e., constitutional neuroses and reactive neuroses. The former is characterized by early onset tracing back to childhood or adolescence, showing symptoms which persist for the greater part of a lifetime; this type of neuroses, as a rule, are difficult to treat and have poor prognosis. Persons suffering reactive neuroses have a comparatively normal premorbid personality, and the onset of their disorder usually follows strong social stress in youth or adult life. These cases of reactive neurosis react favorably to treatment in general and have more favorable prognosis.

I support the following view on the etiology of neuroses. Both constitutional internal factors and stressful external factors play complementary roles in the genesis of neuroses. In other words, the more vulnerable a person is constitutionally, the less the environmental stress needed to trigger the neurotic process. Persons less constitutionally disposed may break down only when life stresses are stronger; the resulting illnesses are thus called reactive neuroses.

Two environmental factors, intellectual over-burden and emotional conflicts, are deemed important in the etiology of neurasthenia. Starting with Beard, the view of intellectual over-work in association with industrialization, urbanization, civilization and multiple inputs of scientific information have been regarded as of primary importance for the increase of incidence of neurasthenia in modern society. Often neurasthenia has been called a disease of modern civilization. In addition, emotional conflicts, such as those resulting from tension in interpersonal relationships or serious competition at work or in school which generate chronic tension, anxiety, depression and other emotional changes, play an important role in causing neurasthenia.

It has been hypothesized that the intensity of tension increased with the advance of civilization, but I do not share this view. It would be difficult to ascertain whether the tensions caused by thunder and lightning, poisonous snakes and beasts of prey, hunger and cold of the ancient era, were less stressful than tension caused by noise of life in a modern city. In modern society it is difficult to say that enjoyment of mental life is proportional to one’s material life.