

It is often just the very fact of the association of these psychological symptoms with the menopause that makes the woman concerned accessible, able to be helped in her difficulties. Her recognition that her doctor also experiences such things can be of immense value, and it is the temporariness of the menopausal state which can make it possible for her to go on to the post-menopausal phase with some confidence, if it can be got across to her both that she is no less a woman than she was before, and that she is no less valuable a person, nor any less valuable than other people, men or women.

To sum up: What chiefly determines the psychological phenomena of the menopause is the fundamental belief or disbelief of the individual woman in her own value as a person. What determines how far we are able to help our patients with their psychological difficulties at this time is our own belief, or disbelief, in our own value, and theirs, as persons. I want to emphasise that I am speaking not of willingness to help, but of ability; the willingness is already implicit in the choice of medicine as a profession. But it comes back to an old story—are we “treating the menopause” in Jane Brown? or are we setting out to help Jane Brown to deal with some difficulties of which she becomes aware at the time of her “change of life”?

Letter to the Editor

Dear Sir,

In the current number of your excellent journal, there is an article entitled “Mental Health and Ill Health” in which it is claimed that mental stress causes physical changes in the nervous system so that nerves become swollen and inflamed and this condition “is palpable to the hands of the physician.” The condition can then apparently be relieved by something called “nerve manipulation” applied to “those parts of the nerves . . . which are found to be in a swollen, atrophied or semi-paralysed state.”

No doubt a form of massage or manipulation may cause relaxation and thus relieve the symptoms of muscular tension caused by mental stress; every little helps, by suggestion or otherwise; but the pathology adumbrated in the article is so peculiar and, to me, suspect, that I am surprised to see it put down in a Journal of this standing.

Yours faithfully,

C. BURNS.

29 Frederick Road, Birmingham 15.

This letter has been shown to Dr. Stephen who feels that the kind of controversy it raises cannot be settled theoretically by discussion or argument but only by practical demonstration.—Ed.