

JOHN AUGUSTINE WALLER

A Treatise on the Incubus, or
Night-Mare, Disturbed Sleep,
Terrific Dreams and Nocturnal
Visions

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A Treatise on the Incubus, or Night-Mare, Disturbed Sleep, Terrific Dreams and Nocturnal Visions

INTRODUCTION

The enjoyment of comfortable and undisturbed sleep, is certainly to be ranked amongst the greatest blessings which heaven has bestowed on mankind; and it may be considered as one of the best criterions of a person enjoying perfect health. On the contrary, any disturbance which occurs in the enjoyment of this invaluable blessing, may be considered a decisive proof of some derangement existing in the animal economy, and a consequent deviation from the standard of health. Indeed it is astonishing how slight a deviation from that standard may be perceived, by paying attention to the circumstance of our sleep and dreams. This may be more clearly demonstrated by attending carefully to the state of persons on the approach of any epidemic fever or other epidemic disease, and indeed of every kind of fever, as I have repeatedly witnessed; when no other signs of a deviation from health could be perceived, the patient has complained of disturbed rest and frightful dreams, with Night-Mare, &c. Hence the dread which the vulgar, in all ages and countries, have had of what they call *bad* dreams; experience having proved to them, that persons, previously to being attacked with some serious or fatal malady, had been visited with these kind of dreams. For this reason they always dread some impending calamity either to themselves or others, whenever they occur; and, so far as relates to themselves, often not without reason. Frightful dreams, however, though frequently the forerunners of dangerous and fatal diseases, will yet often occur when the disturbance of the system is comparatively trifling, as they will generally be found to accompany every derangement of the digestive organs, particularly of the stomach, of the superior portion of the intestinal canal, and of the biliary system. Children, whose digestive organs are peculiarly liable to derangement, are also very frequently the subjects of frightful dreams, and partial Night-Mares; which are frequently distressing enough to them. They are still more so to grown up people, as they generally arise from a more serious derangement of the system. Those who are subject to them will agree with me in opinion, that they are by no means to be ranked amongst the lesser calamities to which our nature is liable.

There are many persons in the world to whom it is no uncommon occurrence, to rise from their bed in the morning more wearied and exhausted, both in mind and body, than when they retired to it the evening before: to whom sleep is frequently an object of terror rather than comfort, and who seek in vain for relief from the means usually recommended by Physicians. To such persons I dedicate this little work; for their information I have laid down, in as clear terms as the subject will admit, the history of those diseases, which, by depriving us of the benefit of sleep, and driving rest from our couch, often render life itself miserable, and lay the foundation of formidable, and sometimes of fatal diseases. Amongst those affections which thus break in upon our repose, the most formidable and the most frequent is the disease called Night-Mare; the history of which, with its various modifications, I have endeavoured to give with as much accuracy as possible, and have attempted also to investigate its nature and immediate causes, as well as to point out the best mode of obtaining relief. Very little assistance could be obtained in this undertaking, from the writings of modern Physicians, who have paid little or no attention to it: those of the sixteenth and seventeenth centuries, seem to have well understood both its causes and cure, but differed much amongst themselves respecting its nature, as will ever be the case when we attempt to reason on any subject which is above our comprehension. I

have availed myself of all the light which these illustrious men could throw upon the subject, which is not a little; but my principal information respecting it has arisen from a personal acquaintance with the disease itself, for a long series of years, having been a victim to it from my earliest infancy. I have never met with any person who has suffered to so great an extent from this affection, or to whom it was become so habitual. To eradicate thoroughly a disease so deeply rooted and of so long duration, cannot be expected: but I have so far succeeded as to bring it under great control, and to keep myself free from its attacks for several months together; or indeed scarcely ever to be disturbed by it at all, but when I have deviated from those rules which experience has proved to be sufficient to secure me from all danger of it.

The various kinds of disturbed sleep taken notice of in this little work, are all so many modifications of Night-Mare, and may be all remedied by observing the rules here laid down, as they will be found to originate from one or other of the causes here specified. The regimen and treatment I have recommended are directed to the root of the disease, that is, to the hypochondriac or hysteric temperament; for Night-Mare, disturbed sleep, terrific dreams, &c. may be considered only as symptoms of great nervous derangement, or hypochondriasis, and are a sure sign that this disease exists to a great extent. Thus, while the patient is seeking, by the means recommended, to get rid of his Night-Mare, he will find his general health improving, and the digestive organs recovering their proper tone.

THE INCUBUS, &c

This disease, vulgarly called Night-Mare, was observed and described by physicians and other writers at a very early period. It was called by the Greeks, *εφιαλτης*, and by the Romans, *Incubus*, both of which names are expressive of the sensation of weight and oppression felt by the persons labouring under it, and which conveys to them the idea of some living *being* having taken its position on the breast, inspiring terror, and impeding respiration and all voluntary motion. It is not very surprising that persons labouring under this extraordinary affection, should ascribe it to the agency of some *dæmon*, or evil spirit; and we accordingly find that this idea of its immediate cause has generally prevailed in all ages and countries. Its real nature has never been satisfactorily explained, nor has it by any means met with that attention from modern physicians which it merits: indeed it scarcely seems to be considered by them as a disease, or to deserve at all the attention of a physician. Those, however, who labour under this affection to any great degree, can bear testimony to the distress and alarm which it occasions; in many cases rendering the approach of night a cause of terror, and life itself miserable, from the dread of untimely suffocation. The little attention paid to this disease by medical men, has left the subjects of it without a remedy, and almost without hope. Its nature and its cause have been altogether misunderstood by those who have lately given any opinion upon it. It appears a general opinion that it only happens to persons lying upon the back, and who have eaten large suppers; the causes of it have consequently been traced to mechanical pressure upon the lungs, arising from a full stomach; and a change of position, together with the avoiding eating any supper, has been thought all that was necessary to prevent its attack. To those, however, who are unfortunately afflicted with it to any degree, it is well known by experience, that no change of position, or abstinence, will secure them from the attacks of this formidable disturber of the night. As I have so long been an unfortunate victim to this enemy of repose, and have suffered more from its repeated attacks than any other person I have ever met with, I hope to be able to throw some light on the nature of this affection, and to point out some mode of relief to the unfortunate victims of it.

The late Dr. Darwin, who had an admirable talent for explaining the phenomena of animal life in general, is of opinion, that this affection is nothing more than sleeping too sound; in which situation of things the power of volition, or command over the muscles of voluntary motion, is too completely suspended; and that the efforts of the patient to recover this power, constitute the disease we call Night-Mare. In order to reconcile this hypothesis with the real state of things, he is obliged to have recourse to a method not unusual amongst theoretic philosophers, both in medicine and other sciences—that is, when the hypothesis does not exactly apply to the phenomenon to be explained by it, to twist the phenomenon itself into such a shape as will make it fit, rather than give up a favourite hypothesis. Now, in order to mould the Night-Mare into the proper form, to make this hypothesis apply to it, he asserts, first, that it only attacks persons when very sound asleep; and secondly, that there cannot exist any difficulty of breathing, since the mere suspension of volition will not produce any, the respiration going on as well asleep as awake; so that he thinks there must needs be some error in this part of the account. Any person, however, that has experienced a paroxysm of Night-Mare, will be disposed rather to give up Dr. Darwin's hypothesis than to mistrust his own feelings as to the difficulty of breathing, which is far the most terrific and painful of any of the symptoms. The dread of suffocation, arising from the inability of inflating the lungs, is so great, that the person, who for the first time in his life is attacked by this “worst phantom of the night,” generally imagines that he has very narrowly escaped death, and that a few seconds more of the complaint would have inevitably proved fatal. This disease, although neglected by modern physicians, was well described and understood by those of the seventeenth century, as well as by the Greeks and Romans.¹ There are few affections more universally

¹ The learned Theophilus Bonetus observes, that this disease was unknown to Hippocrates and Galen.—Vide *Polyath. Lib. ii. Cap.*

felt by all classes of society, yet it is seldom at present considered of sufficient consequence to require medical advice. To those nevertheless who, from sedentary habits, and depraved digestion, are the most frequent subjects of it, it is a source of great anxiety and misery, breaking in upon their repose, and filling the mind with constant alarms for more serious consequences, “making night hideous,” and rendering the couch, which is to others the sweet refuge from all the cares of life, to them an object of dread and terror. To such persons, any alleviation of their sufferings will be considered an act of philanthropy; as they are now in general only deterred from applying to the practitioners of medicine for relief, from the idea that their case is out of the reach of medicine.

It is a very well known fact, however, that this affection is by no means free from danger. I have known one instance in which a paroxysm of it certainly proved fatal, and I have heard of several others. I do not doubt indeed but that this happens oftener than is suspected, where persons have been found dead in their beds, who had retired to rest in apparent health. I do not know that any late writer has observed a fatal case of Night-Mare, but we find a circumstance recorded by Cœlius Aurelianus, who is supposed to have lived a short time before Galen, which, if true, is very remarkable; and I know no reason why it should be doubted. Yet I am aware that in the age in which we live, it is a common practice, not merely to doubt, but to contradict every fact recorded by ancient writers, which, if admitted, would militate against any received theory. Cœlius Aurelianus, however, informs us, upon the authority of *Silimachus*, a follower of Hippocrates, that this affection was once epidemic at Rome, and that a great number of persons in that city died of it.²

A young man, of sober habits, about thirty years of age, by trade a carpenter, had been all his life subject to severe attacks of Night-Mare. During the paroxysm he frequently struggled violently, and vociferated loudly. Being at Norwich for some business, which detained him there several weeks, he one night retired to bed in apparent good health; whether he had eaten supper, or what he had taken previously to going to bed, or during the day, I cannot now remember. In the night, or towards morning, he was heard by some of the family in the house where he lodged to vociferate and groan as he had been accustomed to do during the paroxysms of Night-Mare; but as he was, after no great length of time, perfectly quiet, no person went to his assistance. In the morning, however, it was soon observed that he did not, as usual, make his appearance, and on some person going into his room, he was found dead, having thrown himself by his exertions and struggles out of bed, with his feet, however, still entangled among the bed-clothes. This patient, and the circumstances attending his death, were very well known to me, and I have not the least doubt that it was Night-Mare which proved fatal to him. A similar case has been related to me by a person deserving of credit, and I do not doubt but they are of more frequent occurrence than is generally supposed. It may appear surprising to some, that a person should struggle with so much violence as to throw himself out of bed, and yet not shake off the Night-Mare, since, in general, it is sufficient to call a person by his name, and he will recover. This is indeed true in common cases, and in every case it is of much more service than any exertions which the patient himself can make. I once at sea, in a paroxysm of Night-Mare, threw myself out of my cot, and it nearly cost me my life. Had any person been near to have taken hold of my hand, and have called to me, I should have been easily recovered, whilst, notwithstanding my struggles, and the violence with which I fell out of my cot, I lay nevertheless for some time partly upon a chest, and partly upon the cot, without being able to recover myself. I cannot help thinking that, but for the violent motion of the ship (as it was blowing a gale of wind), and the noise from

xxviii. *De Incubo et Catalepsi*. Unknown it could not be to such observers of nature, although they may not have written upon it. In the book however, ascribed to Galen, entitled “De Utilitate Respirationis,” the following short, but comprehensive notice, is to be found concerning it.—*Et Ephialtes quaedam Epilepsia, quæ fit in somno: fit autem ex mistione tanquam Epilepsia. Ideoque non in vigilante, sed in dormiente: ut enim, prædictum est somnus et epilepsia fiunt in eodem loco, et ex simili causâ: unde Aristoteles dicit epilepsiam esse somnum quendam: verum ephialtes longo tempore perdurans in Epilepsiam convertitur.*

² Memorat denique Silimachus Hippocratis sectator, contagione quâdam, plurimos ex istâ passione, (i. e. Incubo) velut lue, apud Urbem Romam confectos.—*Cœl. Aurel. lib. i. cap. iii. de Incubone.*

every thing about me, that paroxysm of Night-Mare would have proved fatal. The disease had then gained very much upon me, and was at its greatest height.

Although instances of a fatal termination of this disease may be rare; it is not so, to find it degenerate into Epilepsy, of which it is frequently the forerunner, and to which, when it has become habitual, it appears to bear a great affinity. There is however a great difference in the degree of danger, between an accidental and an habitual Night-Mare, which we shall have occasion to notice hereafter.

I shall begin by describing this affection as it most commonly occurs, pointing out the various degrees and varieties of it, and the persons most subject to it. Its remote and proximate causes will be the next subject of consideration, and lastly the means necessary to be pursued for avoiding it, as well as those likely to afford immediate relief.

This affection has been very elegantly and correctly described both by physicians and poets. There are two descriptions of the latter kind which I cannot help placing before the reader; the first is given by the Prince of Latin Poets; the other by one, (not the least,) of our own country.

*Ac veluti in somnis, oculos ubi languida pressit
Nocte quies, nequidquam avidos extendere cursus
Velle videmur, et in mediis conatibus ægri
Succidimus; non lingua valet, non corpore notæ
Sufficiunt vires, nec vox aut verba sequuntur.*
Virgil. Æneid. Lib. xii. v. 909. et sequent.

In broken dreams the image rose
Of varied perils, pains, and woes;
His steed now flounders in the brake,
Now sinks his barge upon the lake;
Now leader of a broken host,
His standard falls, his honour's lost.
Then—from my couch may heavenly might
Chase that worst phantom of the night!

LADY OF THE LAKE, CANTO I. XXIII.

In tracing out the symptoms and mode of attack, I shall particularize those symptoms which I have experienced in my own person, and take notice likewise of those described by other writers on the subject.

First then, this disease attacks always during sleep. This is a truth of which I am now well assured, although frequently the evidence of my senses has apparently produced a contrary conviction. Whatever may be the situation of the patient at the moment previous to the invasion of the disease, he is at that moment asleep, although the transition from the waking to the sleeping state may be so rapid as to be imperceptible. I will explain this part of the subject more fully by and by, at present we will assume the fact, and proceed to enumerate the symptoms. If the patient be in a profound sleep, he is generally alarmed with some disagreeable dream; he imagines that he is exposed to some danger, or pursued by some enemy which he cannot avoid; frequently he feels as though his legs were tied, or deprived of the power of motion; sometimes he fancies himself confined in some very close place, where he is in danger of suffocation, or at the bottom of a cavern or vault from which his return is intercepted. It will not unfrequently happen, that this is the whole of the sensation which the disease, for the time, produces, when it goes off without creating any further annoyance: the patient either falls into an oblivious slumber, or the alarming dream is succeeded by one more pleasant. In this case the disease is not fully formed, but only threatens an invasion; it proves however that the pre-disposition to it exists, and that the person is in danger of it. But when the paroxysm does actually take place,

the uneasiness of the patient in his dream rapidly increases, till it ends in a kind of consciousness that he is in bed, and asleep; but he feels to be oppressed with some weight which confines him upon his back and prevents his breathing, which is now become extremely laborious, so that the lungs cannot be fully inflated by any effort he can make. The sensation is now the most painful that can be conceived; the person becomes every instant more awake and conscious of his situation: he makes violent efforts to move his limbs, especially his arms, with a view of throwing off the incumbent weight, but not a muscle will obey the impulse of the will: he groans aloud, if he has strength to do it, while every effort he makes seems to exhaust the little remaining vigour. The difficulty of breathing goes on increasing, so that every breath he draws, seems to be almost the last that he is likely to draw; the heart generally moves with increased velocity, sometimes is affected with palpitation; the countenance appears ghastly, and the eyes are half open. The patient, if left to himself, lies in this state generally about a minute or two, when he recovers all at once the power of volition: upon which he either jumps up in bed, or instantly changes his position, so as to wake himself thoroughly. If this be not done, the paroxysm is very apt to recur again immediately, as the propensity to sleep is almost irresistible, and, if yielded to, another paroxysm of Night-Mare is for the most part inevitable.

Where the Disease has not established itself by very frequent recurrence, the patient generally feels little inconvenience from it when thoroughly awoke; but where it is habitual, there will generally be felt some confusion in the head, with ringing in the ears, a sense of weight about the forehead, and, if in the dark, luminous *spectra* are frequently seen, such as appear to persons who immediately after gazing on a strong light, close their eyes. The pulse, I believe, will in all instances be found to be considerably accelerated; in my own case the motion of the heart amounts almost to a palpitation.

I do not find this symptom taken notice of by any writer on the subject, excepting Etmuller, whose accuracy in tracing the history of every disease allowed no symptom to escape him. When reasoning on the phenomena which this affection exhibits, “*et cum etiam simul sub respirationis defectu imminuta plus minus evadat sanguinis circulatio, ob id ab eodem infarcti pulmones anxietatem insignem præcordiorum inducunt: sicut dum evigilant tales ægri, cor insignitur palpitat, quod testatur motum convulsivum.*”—This palpitation of the heart grows stronger in proportion to the length of the paroxysm, or the difficulty the patient finds in waking himself.

There is, however, another symptom, which, as far as I am able to learn, is very frequent, though not noticed by medical writers. (*Scilicet.*) *Priapismus interdum vix tolerabilis et aliquamdiu post paroxysmi solutionem persistens.* I have noticed this symptom here, as I intend presently to draw some inference from it. A sense of weight at the stomach, and an unpleasant taste in the mouth will generally be found to remain after the paroxysm, though seldom noticed, as it is not suspected to have any connexion with the Night-Mare.

These are the most ordinary symptoms, and such as generally happen in almost all paroxysms of Night-Mare; there are, however, other symptoms which occasionally occur, and which sometimes cause no small alarm to the patient. It frequently happens too, that the paroxysm goes off without the patient waking, and in that case is productive of strange hallucination to the person who is not accustomed to these paroxysms. It is by no means an uncommon thing for the person labouring under Night-Mare to see, or at least to imagine that he sees, some figure, either human, or otherwise, standing by him, threatening him, or deriding, or oppressing him. This circumstance has been productive of considerable misapprehensions and mistakes, not only with persons of weak minds, but likewise with those whose intellectual faculties have been greatly improved.—These visions are various, as are likewise the senses which become thus hallucinated; not only the sight, but the hearing, and the touch, are frequently imposed on. These hallucinations have so often occurred to myself, that they have long been rendered quite familiar, although they are still sometimes productive of very laughable mistakes. As they are more frequently, however, of the terrific cast, they act very powerfully on the minds of those who are not acquainted with them, and produce terrors which I verily believe sometimes prove fatal. I shall give some instances of these kinds of visions which I

have had from the most indubitable authority, and I do not doubt but that many readers will find in their own recollections a number of circumstances apparently incredible, which will easily admit of the same solution. I must first premise, that the degree of consciousness during a paroxysm of Night-Mare is so much greater than ever happens in a dream, that the person who has had a vision of this kind cannot easily bring himself to acknowledge the deceit, unless, as often happens, he wakes out of the paroxysm, and finds himself in a very different place to what he must have been in for such a transaction to have occurred. When however, all the circumstances of time and place concur with the vision, which sometimes happens, and the patient does not wake in the paroxysm, but continues asleep for some time after, the transactions which occurred during the paroxysm of Night-Mare, and those of the dreams which took place during profound sleep are so very different as to the impression they have left on the sensorium, that there is no possibility of confounding them with one another. Indeed I know no way which a man has of convincing himself that the vision which has occurred during a paroxysm of Night-Mare, (if it be consistent in point of time and place,) is not real, unless he could have the evidence of other persons to the contrary who were present, and awake at the time, or that these hallucinations were rendered familiar to him by frequent repetition. I shall mention some circumstances here, which have occurred to myself and to others, which will place this subject in a clearer point of view.

The first case of this kind which I shall relate, I had from the mouth of a person of undoubted veracity, who never understood the nature of the hallucination; but who, to the day of his death, was convinced that he had received a supernatural visitation.

Mr. T–, a dissenting minister, was on a journey in Suffolk, and slept at the house of a friend. He was desired by the master of the family not to disturb himself in the morning till he was called; supposing that he was fatigued and would require repose. Mr. T–, however, did not sleep very sound, he awoke often, and as it was in the summer season, and he had no watch with him, began to grow anxious about the time, as it had been long day-light: he thought, however, on what he had been told over night, and was expecting very shortly to be called to breakfast. He described himself as being awoken out of his sleep by hearing distinctly some person in an adjoining room get out of bed, and walk across the room to a door communicating with his own, which he heard opened, and a voice called to him, repeating distinctly his name, three times. He supposes that he immediately afterwards fell asleep, and did not wake till some time after, when, he observed, he had a paroxysm of Night-Mare; on recovering, however, from this, he instantly got up, supposing that he had overslept himself, and that the family would be waiting for him to breakfast. He was greatly surprised to find the doors and the windows of the house all close shut, and no one of the family stirring; it was in fact only five o'clock in the morning. He consequently returned to bed, and slept comfortably till breakfast was really announced to him. He related to the family the adventure which had occurred to him, which seemed to cause little surprize, but produced tears from some of them: they informed him that nobody slept in the adjoining room, but that it had formerly been occupied by their son, who had been several years at sea; that they had heard nothing of him for some months, and entertained no doubt of his being dead, and this circumstance served to confirm them in their opinion, and left no doubt in the minds of all present that Mr. T– had received a supernatural visitation. Mr. T– was himself of the same opinion to the day of his death, although the young gentleman whose fate was considered so well ascertained, proved in the sequel to be alive.

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