

Kretschmer in distinguishing four morphological types—the pycnic, the athletic, the asthenic and the dysplastic. Kretschmer found a preponderance of the pycnic type to be cyclothymic, and of the other three types to be schizophrenic. The author does not draw any conclusions from his own work. W. D. CHAMBERS.

A Case of Chronic Hallucinosis [Sur un Cas d'Hallucinosse Chronique].
(*Ann. Med. Psych.*, July, 1926.) Leyritz, J.

This paper is a very careful description of a case of long-standing hallucination in a woman, æt. 70, without any enfeeblement or delusion, followed by a discussion on the nature and mode of development of the hallucinations. This case began as complex pseudo-hallucinations which were later located in the exterior, thus confirming the theory of Froment that hallucinations are nothing more than a lively variety of interior language. No indications of any endogenous or exogenous toxin were observed.

W. D. CHAMBERS.

F. Doublet and Psychiatry in the Time of Louis XVI [François Doublet et la Psychiatrie au Temps de Louis XVI]. (*Ann. Med. Psych.*, July, 1926.) Carrette, P.

This paper is a review of the work of François Doublet, published in 1785, on the therapy of mental disorders. Doublet regarded these as divided into four classes—delirium, mania, melancholia and imbecility. For delirium the treatment recommended was phlebotomy, hydrotherapy, purgation and blisters; but it was recognized that delirium often arose in the course of a bodily disease which must be diagnosed and treated. The treatment for mania was similar, but less drastic, warm baths being particularly commended. It was observed that mania may often be cured by an intercurrent disease. For melancholia, bleeding is most valuable, and gentle aperients may be followed by stronger purges. Imbecility is noted as the mildest but least tractable of mental disorders.

The author of the paper regrets that the energetic treatment indicated above lapsed early in the nineteenth century, when the teaching of Pinel gained influence, and quotes critics of Pinel to this effect. The view of Fodéré (1817) was that Pinel had put nothing but expectant medicine in the place of the methods of treatment he banished.

W. D. CHAMBERS.

The Affective Symptomatology of Disseminated Sclerosis. (*Journ. of Neur. and Psycho-path.*, July, 1926.) Cottrell, S. S., and Kinnier Wilson, S. A.

In a lengthy paper these authors present in interesting detail a study of the emotional changes in 100 cases of disseminated sclerosis. Minute attention is paid to the "bodily feeling" of these patients.

Having dealt with the literature the authors proceed to outline their method of examination. The clinical material is considered

from various view-points, *e.g.*, sex, age at onset, duration of symptoms at time of examination and neurological types. Then the authors pass to the affective symptomatology, which is discussed under the headings of (1) emotional content (prevailing mood), (2) psychical determinants, (3) physical determinants, and (4) affective expression and behaviour, numerous tables being appended, with short clinical illustrations. There follows an analysis of individual symptoms under the sub-headings of "exaggeration of emotional expression," "emotional content," "bodily feeling" and "optimism (*spes sclerotica*)," and the authors bring their paper to a close by a discussion of the pathogenesis of affective symptoms.

Among many important conclusions reached are the following :

The affective symptoms are characteristic of the disease, are primary or direct results of the disease-processes, and are completely independent of duration, degree or clinical type. In a fair number of instances they precede the appearance of any somatic neurological symptoms, subjective or objective.

The feeling of well-being may be designated *euphoria sclerotica*, and that of physical well-being *eutonia sclerotica*. The undue optimism exhibited by a majority of patients may be called *spes sclerotica*.

The authors associate the invasion of the affective sphere with the known pathological fact that the disease almost constantly shows a periventricular and subependymal spread, and they regard the comparative integrity of the intellectual faculties as dependent upon the relative conservation of the cortex.

Evidence is adduced which suggests that the affective symptoms are the outcome of invasion of the palæothalamus by the morbid process, and it is concluded that certain psychoses and psychoneuroses characterized by changes in the affective field may have, a toxic or toxi-structural and not a psycho-pathological basis.

WM. MCWILLIAM.

The Normal Course and Expectation of Life in General Paralysis.
(*State Hosp. Quarterly, August, 1926.*) Woodman, R.

The duration of life after admission to the Middletown State Homeopathic Hospital is discussed. In 1872, when no nursing was attempted, duration is stated to have been only nine months. From 1885 to 1900, when nursing attention was given, the average duration was a little over 23 months. From 1907 to 1917, when the cases were given little or no medical treatment, but only nursing attention, as in the previous group, the average duration was 26 months.

G. DE M. RUDOLF.

Weight of the Heart in Dementia Præcox. (*State Hosp. Quarterly, May, 1926.*) Reed, R. G.

The author's paper is based on one by Nolan Lewis entitled "The Constitutional Factors in Dementia Præcox," and deals particularly with the claim that in this psychosis the heart is