

*States of Anxiety [Les États Anxieux]. (Bull. de la Soc. de Méd. Ment. de Belg., Aug.-Oct., 1911.) Famenne and Hartenberg.*

After an elaborate discussion, in which he considers (1) history and definition, (2) ætiology and pathology, (3) symptomatology, (4) mechanism, hypotheses and theories, (5) therapy of the states of anxiety, Famenne draws the following *conclusions*: (1) The state of anxiety, whose intimate mechanism is still unknown, is a consciousness, more or less definite, of a real disorder of the respiratory and circulatory functions. It is a syndrome characterised both by mental symptoms and by physical signs. It does not occur in isolation, but always in close association with other maladies, such as neurasthenia, psychasthenia, and manic-depressive insanity; or with other organic troubles resulting from trauma or from violent emotion. (2) There is no such entity as the "anxiety neurosis," as we learn from a study of the ætiology, the symptoms, and the course of the affections under consideration. (3) The state of anxiety plays the leading part among the auto-suggestions which give rise (owing to a special susceptibility of the central nervous system, and to the action on these centres of certain peculiar stimuli) to the obsessions and the phobias. (4) The treatment of the state of anxiety should be both psycho-therapeutic and medicinal, and by appropriate measures we can often effect a cure not only of the state of anxiety itself, but also of the condition of psychasthenia to which that state has given rise.

Famenne goes on to state the following *problems*: (1) Are there any data which may throw light on the reasons why states of anxiety supervene in certain cases and not in others, although in all these cases alike we have to do with emotional subjects? (2) What is the organic basis of the state of anxiety? How do these disturbances differ from those which exist when emotion is unaccompanied by anxiety? (3) Are there any reasons for believing that states of anxiety arise from a neurosis of the great sympathetic, and that they are localised in this region of the nervous system? (4) What part is played by the state of anxiety in auto-suggestion, and especially in the traumatic neuroses? (5) What part is played by the state of anxiety in the causation of psychoses?

Hartenberg's conclusions are summarised as follows: (1) We may assert that states of anxiety are merely exaggerations, the cause of which remains obscure, of the emotional anxiety of perfectly normal persons. (2) Such states are of three degrees of intensity—uneasiness, anxiety, anguish. (3) The state of anxiety appears to be the indispensable pre-condition of certain neuropathic disorders which are always secondary to these states, *viz.*, phobias, impulsions, and manias of anxiety, *folie de doute* and *folie de scrupule*; divers obsessions, anxious auto-suggestions. (4) The state of anxiety is to be regarded as a psycho-neuropathic syndrome, sometimes congenital, but sometimes acquired (Freud's anxiety-neurosis); sometimes isolated, sometimes complicated by neurasthenia, melancholia, and various psychoses. (5) We are not justified in regarding either the anxiety-neurosis or psychasthenia as constituting an independent morbid entity.

M. EDEN PAUL.