

indication stated whether the boarding period should be determined by the medical authority of the licensed house or by the boarders themselves, or by the judicial authority.

The further question arises whether any licensed house would voluntarily receive such persons, or whether they, if designated by the Judge for that purpose, would be bound to receive them.

The proposition certainly seems an impossible one : and it must be hoped that the learned Judge will himself see this.

The total average cost per head for maintenance for all asylums showed a further increase of  $6\frac{3}{4}$ d. per week on the previous year ; and this appears to be a moderate rise in relation to the increased cost of food, etc.

Mental deficiency care would appear to be progressing as satisfactorily as war conditions will permit. The report speaks highly of the valuable help of voluntary associations in the supervision of defectives. The Brighton Guardianship Society is specially cited as an example. The number of mental defectives on the register of the Board are : January 1st, 1918, 6,836, of whom nearly 6,000 were in certified institutions ; but this does not include a very large number, who are at present cared for by the Education and Poor Law authorities, as well as many others not yet dealt with in any public way.

The training of teachers and attendants on the mentally defectives is receiving the attention of the Board, and the hope is expressed that the next annual report will contain an account of a practical and inexpensive scheme for this purpose.

During the year eight certified institutions were established. The reports of the visits by the Board to the various institutions are given in full, and contain a considerable amount of information interesting to those specially concerned in the administration of the Act.

As stated at the outset, there is little in the report affording a basis for criticism, and in the present stress of work thrown on the Board, it would be unfair to expect any of the new departures in the treatment of the insane, which we may hope may be dealt with when the country again enjoys the opportunities of progress afforded by a lasting peace.

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### Part III.—Epitome of Current Literature.

#### 1. Physiological Psychology.

*The Nature of Mental Process.* (*Psychol. Rev.*, May, 1917.) Carr, Harvey.

The author proposes the view that the mental functions with which psychology is concerned are in reality psycho-physical and at times neural, and that psychology must attempt to comprehend these functions in their entirety. That is to say that psychology must not be content to deal with the conscious and subjective elements of psycho-physical events, leaving their neural correlates to physiology, but include within its domain all the neural events involved. This, Carr points out, is unorthodox as a definition of the scope of psychology, but is entirely in

harmony with the prevailing biological point of view. The new definition of the mental permits a restatement and solution of the mind-body problem more in accordance with common sense, the distinction of mind and body being regarded as "merely a distinction of two systems of organic function."

Carr remarks that the subjective conception of mental process constitutes an inadequate tool for the physician who attempts to comprehend physical disorder. To diagnose a case as "purely mental," and to give the impression that it could not in any way be stated in neural terms, is "a crude and preposterous conception." But, unlike Watson and other critics, Carr is inclined to put the blame less on medicine than on psychology. Medicine has merely accepted current conceptions set up by psychology, which has introduced into medicine old philosophical problems regarding the relations of mind and body. These old problems vanish at once if we assume that the disordered mental functions are in reality psycho-physical events.

This psycho-physical conception of mental process, the author claims, offers a mediating point of contact for the two extremes of subjectivism and behaviourism. It permits mental processes to be studied from the standpoint of immediate experience, or of objective observation, or of clinical data. It differs from subjectivism by allowing an objective method of approach. It differs from behaviourism by admitting that the study of conscious data can give much useful information. Behaviourism, logically defined, includes the whole field of organic function. But psychology should be content with a more modest programme, still allowing a place beside it to biology and physiology. The parallelism of mental and physical still remains as a working hypothesis, but it is the total activity that becomes the object of study; the dichotomy involved is not one of process but merely of method of approach.

There are no immutable boundaries between sciences. A science must take up whatever is pertinent to its primary interest. If mental acts are a means of organic adjustment they must be studied. If neural events are an essential part of the act, they, too, must be included.

HAVELOCK ELLIS.

## 2. Clinical Neurology and Psychiatry.

*The Voltaic Vertigo Test in Epilepsy* [*Le Vertigini Voltaiche negli Epilettici*]. (*Rivista di Patologia e Nervosa e Mentale*, October, 1917.) *Bonola, Dr. F.*

In epilepsy, the writer remarks, vertigo, as a subjective state, occurs rather frequently, either as the aura or as a symptom.

The vertiginous sensation represents an illusion of the failure of our static relations with our surroundings; a momentary suspension, in other words, of that complex of the sensations of the orientation of our body which is furnished to us principally by stimuli transmitted to us from the semicircular canals and the vestibule, and secondarily by visual sensations.

The very important part played by the semicircular canals and the vestibule in our static sense is proved by observing either the results