

fiction with human evolutionary processes; any emotional conflict with those processes may lead to physical expressions of that disharmony.

JANE I. SUTTIE.

Illness and Psyche [Krankheit und Psyche]. (Internat. Zeits. f. Individ. Psychol., April-June, 1934.) Holub, A.

The main thesis of this article is that an illness never really changes a personality, but that the personality colours any illness. The emotional significance of illness in general, and of individual symptoms in particular, is illustrated by a great number of appropriate cases. The emotional determination of accidents is also dealt with.

JANE I. SUTTIE.

On the Genetic Relations of Certain Obsessional-neurotic Character Traits (Integrity-complex). (Journ. of Nerv. and Ment. Dis., vol. lxxxi, p. 43, Jan., 1935.) Bruël, O.

The author from his own observations confirms the fact already established that sadistic impulses and parsimony are both found together in the obsessional neurosis. He quotes from the Danish language phrases and modes of speech in common use clearly illuminating the above relationship. He draws a comparison between the inhabitants of Jutland and Scotland, both living in barren and stern countries.

G. W. T. H. FLEMING.

On the Pathology of the Image of the Self [Sur la pathologie de l'image de soi]. (Ann. Méd. Psych., vol. xiv [ii], pp. 519 and 744, Nov. and Dec., 1934.) Van Bogaert, L.

A series of cases in support of the theory that there is in the mind a somatic image of the body, a postural configuration, independent of superficial and deep sensibility. This plays an important though unperceived rôle in the appreciation, which each individual has of himself. Normally unconscious, it takes on, under certain conditions, the character of a very painful reality. The conservation of this image of the self is closely associated with the functions regulating posture and equilibrium. It is especially concerned with bilateral activities, and any disorder modifies the capacity to carry out movements requiring symmetrical innervation.

The sulcus within the angular gyrus, more especially the right, is believed to be particularly concerned with postural configuration, lesions in this region being associated with diminished consciousness of the self and with impoverished action. On the other hand, in some cases of thalamic lesion the image of the self, or a part of it, is appreciated as a painful and foreign shadow.

Cases cited include two of phantom limbs following amputation; a case of phantom legs in the gynæcological attitude following spinal anæsthesia for rectal fistula; two cases of phantom limbs in hemiplegics; two examples of anosognosia; two cases in which the disorder of the unity of the somatic self is accompanied by visual excitement (hallucinations) and lateral rotation; one case of rectal cancer in which the somatic self is projected as a double, and two cases of advanced depersonalization.

STANLEY M. COLEMAN.

The Influence of Psychologic Factors upon Gastro-Intestinal Disturbances: A Symposium. (i) General Principles, Objectives, and Preliminary Results. (Psychoanal. Quart., vol. iii, p. 501, Oct., 1934.) Alexander, F.

The gastro-intestinal tract, according to its three main functions of intaking, retaining and eliminating, is especially suitable for the expression of three elementary instinctive tendencies, if their normal expression through the voluntary motor system or through the sexual apparatus is inhibited through inner conflicts. With reference both to the somatic symptoms and to the typical psychological conflict situation involved three groups are isolated:

The first group, the *gastric* type, includes a wide range of patients with minor subjective disturbances, and also severe cases of peptic ulcer. What is found to be characteristic is, not a certain personality type, but a typical conflict situation which may develop in very different personalities. This typical conflict situation is the rejection of strong oral-receptive tendencies on account of their incompatibility with the aspirations of the ego for independence and activity. Consciously, the gastric type avoids dependence and assumes the exact opposite, independence and activity, over-compensations reactively increasing the unconscious urge for the former. Analysis demonstrates a deep oral regression to the parasitic situation of the infant, rejected and repressed owing to its incompatibility with the attitude and ideals of the adult ego. The specific reasons for the ego's rejection are a narcissistic injury caused by the infantile claims, and manifested in a sense of inferiority on the one hand and by guilt and fear on the other.

This intense wish to be loved, to depend upon others, being rejected by the adult ego, only the regressive pathway remains open: the wish to be loved becomes converted into the wish to be fed. This repressed urge mobilizes the innervations of the stomach, which are, since the beginning of extra-uterine life, closely associated with the most primordial form of receiving something, namely, with the process of receiving food. These innervations serve as a continuous stimulus to the stomach, and finally lead to its dysfunction, with chronic hypermotility and hypersecretion, since this stimulus has its origin in emotional conflicts entirely independent of the physiologic state of hunger. Experimental and clinical evidence is quoted in support of these assumptions.

The second group, the *colitis* type, is characterized by constipation alternating with painful diarrhoea, with cramps and often mucous evacuations. This type, in contradistinction to the gastric type, easily accepts a dependent position, readily gives up work, and lacks the drive and ambition characteristic of the gastric patient. The colitis patient, like the compulsive neurotic, is able to receive, to make demands on others and be supported by them, provided he pays for it in the form of painful evacuations. In his unconscious there is the same oral-receptive and acquisitive tendencies, but both the fear and sense of inferiority are lacking. This is because the physiologic symptom, diarrhoea, has a symbolic restitutive value. It is assumed that, as in the gastric cases, the peristaltic function of the intestines, under the permanent psychic stimulus of the wish to eject and to give, becomes independent of the normal physiologic regulation.

In the third group, the *constipation* type, a pessimistic attitude toward receiving help from others or depending upon them seems to prevail. Consciously the typical attitude is, "I do not take or receive, and therefore I do not need to give". The deeper dynamic factors responsible for the chronic inhibitory stimuli leading to constipation are, (i) the rejection of the obligation to give on account of fear of loss (castration fear), and (ii) the inhibition of anal sadistic impulses (to give spitefully in a destructive way).

STANLEY M. COLEMAN.

The Evolution of Culture. (*Int. Journ. of Psycho-anal.*, vol. xv, p. 387, Oct., 1934.)
Röheim, G.

It is through a series of complicated mechanisms of dealing with anxiety that our civilization has developed and is developing. In this paper various systems, through which human culture has developed, are described. For example, the people of Manus and Duau withdraw all cathexis from the genital to the anal organization; they substitute property for love. In the still more primitive people of Central Australia it is different. Nobody accumulates property; there is nothing to distribute. Group masturbatory ritual, the phallic phase of development with stress laid on the male genital and with the exclusion of women, is the basis of society. The group-ideal is the old man, the keeper of the tjurunga (phallus), the leading actor of the ceremony (primal scene), the repository of traditional knowledge.

In each primitive society the id-aims and the ego undergo modifications, but