A NOTE ON PSYCHOPATHOLOGY AND PERIODICITY.

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The following tentative theory is to a large extent influenced by Rouart's work. This psychiatrist recognizes two fundamental forms of behaviour—periodic and intermittent.

The former is the mechanism by means of which the organism prefers to react unless frustrated by outside agents. In human beings this periodicity is manifest everywhere, but most markedly in those systems least subject to external disturbance, for instance the circulatory system.

The latter, intermittent reaction, is essentially an immediate adaptation to the environment. Presumably it evolved as a response to interference with the periodic reaction by external factors. Intermittent reaction necessitates the storing up of energy and the inhibition of periodicity until, under the influence of the appropriate key stimulus, a release of energy with an attempt to restore the normal equilibrium of the organism takes place.

Periodicity is, however, the preferred mode of reaction. Economically it is a saver of energy, and there is always a tendency under favourable circumstances to revert again to a modified periodicity.

The nervous system shows the same inherent preference for periodic or rhythmic action. To mention a few examples, the periodicity of sleeping and waking, activity and repose, and to some extent of normal mood swings. Again there is the rhythm of walking, bicycling and other acquired habits, also the gradual temporal fixation of habits in older people. Again in the repetition compulsion, regarded as the most primitive psychic urge, psycho-analysis appreciates this phenomena.

Actually this fundamental tendency towards periodicity is constantly interfered with by the necessity of reacting intermittently to the environment. Normal behaviour with economic working and maximum efficiency strikes a mean between these two modes of action.

Faulty maladjusted behaviour may be also of two types. First it may show a regression to the more fundamental periodicity with more or less total obliviousness to immediate response. This mode of pathological reaction is characteristic of the manic-depressive psychoses, and to a lesser degree of the epileptic and katatonic states. The second mode is characterized by inappropriate intermittent response, the mode of behaviour in the schizophrenias, obsessional states and hysteria. In actual practice it is rare to find either form in a pure state.

Turning now to the psychopathology of manic-depressive insanity, psychoanalysis has demonstrated a series of ætiological factors. Starting at the surface there is usually found some disappointment in the love-life as a precipitating or exciting factor. This is found on analysis to be merely a pale replica of an earlier trauma; an infantile disappointment or loss of love occurring before the œdipal wishes were mastered, and resulting in a severe shock to primary narcissism. Ultimately psycho-analysis traces back the genesis of the disorder to a fixation of libido at the oral and to a lesser extent the analerotic zone. Analysis can proceed no further, and is forced to concede a constitutional factor, an inherent intensification of mouth and anal eroticism.

What exactly is meant by this last constitutional factor? Presumably that such an infant has excessive difficulty in suiting its oral and anal needs to the dictates of society. Here it is of interest to note that it is at just these two points, the ends of the alimentary tract, that the automatic and periodic functioning of the digestive system is most interfered with by exogenous factors.

It is suggested that regulation of feeding and the evacuation of the rectum constitute not only, as psycho-analysis has pointed out, the child's first loss of individual freedom, but at the same time the first attempt to modify the periodicity of the body. Any failure would indicate an inherent weakness in the mechanism of intermittent reaction, and might well set a pattern for all subsequent behaviour. It is suggested that in the manic-depressive group this inadequacy of intermittent response, especially in its efforts to control and modify periodicity, is the essential constitutional anomaly, this weakness first showing itself in unsuccessful attempts to modify the behaviour of the alimentary tract.