

Bibliography and Epitome

VOL. 34	ACTA PSYCHIAT. NEUR. SCAND.	1959
	Borderline Schizophrenia in Children. <i>Brask, B. Hoeg.</i>	265
	Memory Disturbances after Electroconvulsive Therapy. <i>Cronholm, B., and Lagergren, A.</i>	283
	Toxoplasmic Encephalopathy. <i>Hafström, T.</i>	311
	Hemisphocephaly, an Unusual Deformity of the Skull. <i>Laitinen, L.</i>	322
	Recovery of Consciousness after E.C.T. <i>Mowbray, R.</i>	330
	Effect of "Ciba 13.155" in the Treatment of Spastic Paraplegia. <i>Pedersen, E., and Schleisner, P.</i>	342
	Treatment of Non-obstructive (Communicating) Hydrocephalus by Cauterization of the Choroid Plexuses. Long-term Follow-up Study. <i>Scarff, J.</i>	354
	On Objectivity and Causality in Psychiatry. <i>Vanggaard, T.</i>	375
	Tofranil-Treatment of Endogenous Depressions. <i>Andersen, H., and Kristiansen, E.</i>	387
	Tumors of the Spine. <i>Arseni, C., et al.</i>	398
	The Association of Hepatolenticular Degeneration with Schizophrenia. <i>Beard, A.</i>	411
	Arteriovenous Malformations of the Brain. <i>Björkesten, G., and Troupp, H.</i>	429
	The Electroencephalogram in Elderly Persons Suffering from Neuropsychiatric Disorders. <i>Frey, T., and Sjögren, H.</i>	438
	Anomalies of the Mid-line Structures of the Brain. <i>Oftedal, S.</i>	451
	Multidimensional Diagnostic Approach. <i>Timmermann, E.</i>	464
	A Clinical Comparison of the Di-Iodo-Compound Umbradil and the Tri-Iodo-Compound Urokon in 133 Cerebral Angiographies. <i>Presthus, J., and Bruland, H.</i>	479
	Hereditary Spastic Paraplegia. <i>Aagenæs, Ø.</i>	489
VOL. 34	ACTA PSYCHIAT. NEUR. SCAND. SUPPT.	1959
	Retinal Degeneration Combined with Obesity, Diabetes Mellitus and Neurogenous Deafness. <i>Alström, C. H., et al.</i>	129
	Studies in Schizophrenia. <i>Bruch, H.</i>	130
	The Motor Unit Potential in Severely Paretic Muscles after Acute Anterior Poliomyelitis. <i>Lindqvist, C.</i>	131
	An Experimental Investigation of Simulation and Pseudo-dementia. <i>Anderson, E. W., et al.</i>	132
	The Urinary Excretion of Adrenaline and Noradrenaline in Some Mental Diseases. <i>Bergsman, A.</i>	133
	The Anancastic Syndrome. <i>Skoog, G.</i>	134
	A Follow-up Study of 270 Patients with Acute Affective Psychoses. <i>Astrup, C., et al.</i>	135
	Report on the 14th Congress of Scandinavian Neurologists.	137
	Retinitis Pigmentosa Combined with Congenital Deafness, etc. <i>Hallgren, B.</i>	138
	Reduction of Increased Intracranial Pressure by Hyperventilation. <i>Lundberg, N., et al.</i>	139
VOL. 1	A.M.A. ARCH. GEN. PSYCHIAT.	JULY, 1959
	Some Difficulties of Psychotherapeutic Practice. <i>Gedo, J. E.</i>	3
	*Potentiating Effect of Alcohol on Tranquilizers and Other Central Depressants. <i>Kopmann, E., and Hughes, F. W.</i>	7
	Obsessions of Infanticide. <i>Chapman, A. H.</i>	12
	Morphology and Other Parameters of Phantasy in the Schizophrenias. <i>Cappon, D.</i>	17
	The SHP Test—an Aid in the Detection and Measurement of Depression. <i>Peck, R. E.</i>	35
	*Evaluation of Certain Drugs in Geriatric Patients. <i>Robinson, D. B.</i>	41
	Comparison of the LSD-25 Experience and Delirium Tremens. <i>Ditman, K. S., and Whittlesey, J. R. B.</i>	47
	Cultural Determinants of Response to Hallucinatory Experience. <i>Wallace, A. F. C.</i>	58
	Some Neurophysiologic Aspects of Depressed States. <i>Whatmore, G. B., and Ellis, R. M. Jr.</i>	70
	Problems of "Perception" and "Communication" in Mental Illness. <i>Rioch, D. McK.</i>	81
	Maintenance of Stereotyped Roles in the Families of Schizophrenics. <i>Ryckoff, I., et al.</i>	93
	Direct Instigation of Behavioral Changes in Psychotherapy. <i>Stevenson, I.</i>	99
	*Urinary "Epinephrines" in Patients with Mental and Emotional Disorders. <i>Sulkowitch, H., and Altschule, M. D.</i>	108

Potentiating Effect of Alcohol on Tranquilizers and Other Central Depressants

Extinction of a learned response under shock-avoidance conditions involving a two-choice discrimination situation was studied in rats.

In a newly-designed apparatus they have measured anxiety reduction, discrimination loss,

and inability to respond, as operationally defined. Phenaglycodol, meprobamate, and alcohol decreased anxiety and discrimination and increased the inability to respond. When the drugs were combined with alcohol, however, anxiety was potentiatingly reduced by meprobamate, chlorpromazine, and pentobarbital. Loss of discrimination by alcohol was potentiated by meprobamate, chlorpromazine, phenaglycodol, and pentobarbital. The complete inability to respond as induced by alcohol was also potentiated by meprobamate, phenaglycodol, and chlorpromazine.

(Authors' Abstr.)

Evaluation of Certain Drugs in Geriatric Patient

No statistically significant differences in beneficial effects were demonstrated when the changes induced by chlorpromazine, reserpine, or pentylenetetrazol were compared with effects of a placebo in senile female patients studied at the Rochester State Hospital.

In isolated instances of drug therapy, sustained improvement was observed to a degree not seen in the group of patients receiving a placebo. These isolated cases were fairly evenly distributed among the groups receiving the drugs under study. An initial improvement during the first six weeks of drug therapy observed in eight patients was followed by a regression to control levels when drug therapy was continued for an additional six weeks. Therefore, initial favourable responses must be viewed with caution.

Patients with the least degree of organic damage seemed to respond better than patients with advanced deterioration. However, the number of patients showing evidence of mild deterioration was small. A tendency to lower the level of functioning in many patients was observed with each of the medications, as compared with spontaneous deterioration observed in the group given a placebo. This tendency was statistically significant in the patients who received chlorpromazine, while the trend was not statistically significant for patients treated with reserpine or pentylenetetrazol.

Undesirable side-effects were most prevalent in the patients who received chlorpromazine. The side-effects included inertia, skin reactions, jaundice (in one case), and pallor. The most frequent side-effects encountered with reserpine included inertia, dryness of the mouth, and diarrhoea. Convulsions occurred in two patients and myoclonus in two patients who received pentylenetetrazol.

In general, it may be concluded that the use of chlorpromazine, reserpine, and pentylenetetrazol (Metrazol) will not effect any significant improvement in the groups of senile patients found in state hospitals.

Urinary "Epinephrines" in Patients with Mental and Emotional Disorders

Studies on the urines of patients with a variety of psychiatric disorders revealed increased excretion of urinary "epinephrines", i.e. epinephrines and/or substances related to it, in most of them. The range of values was the same in the various diagnostic categories and was not influenced by administration as such of tranquillizing drugs. However, improvement, by whatever means effected, was accompanied by lowered excretions.

The urines of depressed and/or psychotic patients contained an unstable fraction that had properties similar to those of adrenolutin: Reaction of this fraction with 2,3-naphthalenediamine yielded a compound with an absorption spectrum similar to that of the compound formed in the reaction between pure adrenolutin and 2,3-naphthalenediamine. Available evidence indicates that the urines studied contained a mixture of epinephrine and an adrenolutin-like substance. Since the latter substance constituted much or most of the urinary "epinephrines" excreted by psychotic patients, it appears that the quantity of catecholamines excreted by psychotic patients is much less than that by patients with anxiety neurosis.

The possible significance of these findings in interpreting the origin of certain mental symptoms is discussed.

(Authors' Abstr.)

AUGUST

1959

Practice of Surgery in a Neuropsychiatric Hospital. <i>Marchand, W. E.</i>	123
A Transactional Model for Psychotherapy. <i>Grinker, R. R.</i>	132
*Parents of Schizophrenics, Neurotics, and Normals. <i>Fisher, S., et al.</i>	149
Self-Perceptual Patterns Among Ulcer Patients. <i>Lieberman, M. A., et al.</i>	167
Delusion Formation During the Activation of Chronic Schizophrenic Patients. <i>Stone, A. A., and Eldred, S. H.</i>	177
Nocturnal Orgasm in Women. <i>Winokur, G., et al.</i>	180
Patients' and Physicians' Judgments of Outcome of Psychotherapy in an Outpatient Clinic. <i>Board, F. A.</i>	185
A Symptom Rating Scale for Use with Psychotic Patients. <i>Jenkins, R. L., et al.</i>	197
Episodic Behavioral Disorders—Schizophrenia or Epilepsy. <i>Monroe, R. R.</i>	205
Effects of Reserpine, Iproniazid (Marsilid), and Triiodothyronine (Trionine) and of Reserpine Alone. <i>Gallagher, W. J., et al.</i>	215
Chlorpromazine, Trifluorpromazine, and Prochlorperazine in Chronic Psychosis. <i>Hanlon, T. E., et al.</i> ,	223

- *Disappearance Rates of Infused Epinephrine and Norepinephrine from Plasma.
Cohen, G., et al. 228

Parents of Schizophrenics, Neurotics and Normals

This study has concerned itself with testing the hypothesis that the degree of personality pathology manifested by a patient is a function of the degree of pathology characterizing his parents. The parents of 20 normal men, 20 neurotic men, and 20 schizophrenic men were compared with one another by means of a battery of techniques which included measures not only of individual functioning but also of spouse interaction patterns. It was found that parents of normal men are individually less maladjusted than parents of neurotics and parents of schizophrenics.

There were no apparent differences in this respect between parents of neurotics and parents of schizophrenics. It was further shown that both parents of normals and parents of neurotics may be distinguished from parents of schizophrenics by having closer, more harmoniously intercommunicating spouse relationships.

(Authors' Abstr.)

Disappearance Rates of Infused Epinephrine and Norepinephrine from Plasma

Increased adrenal-medullary and sympathetic-nerve secretions were simulated in a group of schizophrenic subjects and normal volunteers by means of intravenous infusions of epinephrine and norepinephrine. A study of the plasma concentrations attained by the infused catecholamines demonstrated that the rates of utilization of circulating epinephrine and norepinephrine were equivalent for the two groups.

(Authors' Abstr.)

SEPTEMBER

1959

Rigidity, Chronicity, Schizophrenia. <i>Boverman, M.</i>	235
*Production of High-Energy Phosphate Bonds in Schizophrenia. <i>Gottlieb, J. S., et al.</i>	243
Neurophysiologic Variants in Schizophrenia. <i>Kamp, H. V., et al.</i>	250
Empirical Observations on Mental-Status Examination. <i>Bostian, D. W., et al.</i>	253
Predictive and Concomitant Variables Related to Improvement with Actual and Simulated E.C.T. <i>Brill, N. Q., et al.</i>	263
Efficacy of Placement of Neuropsychiatric Patients in Family Care. <i>Ullmann, L. P., and Berkman, V. C.</i>	273
*Effect of Repeated Doses of Insulin on Excretion of Pyrocatecholamines. <i>Sourkes, T. L., et al.</i>	275
*Acquired and Crossed Tolerance to Mescaline, LSD-25 and BOL-148. <i>Balestrieri, A., and Fontanari, D.</i>	279
*The Protein Metabolism in Anorexia Nervosa. <i>Börjeson, M., and Wretling, A.</i>	283
The Psychodynamic Formulation of Conflict. <i>Weisman, A. D.</i>	288
Hyperkinesis and Organicity in Children. <i>Knobel, M., et al.</i>	310
Hallucinations à Troix. <i>Lukianowicz, N.</i>	322
Transsexualism. <i>Northrup, G.</i>	332
Statistics, Science and Psychiatry. <i>Thorpe, J. G., and Baker, A. A.</i>	338
Effect of Blood Plasma from Psychotic Patients upon Activity Levels of white rats. <i>Stern, J. A., et al.</i>	342

Production of High-Energy Phosphate Bonds in Schizophrenia

The levels of adenosinetriphosphate (ATP), adenosinediphosphate (ADP), adenylic acid (AMP), and fructose-1,6-di-phosphate (F1,6P) and the specific activities (radioactivity per minute per milligram) of ATP, ADP, and F1,6P were measured in the erythrocytes of 10 control subjects and of 10 acute and 10 chronic schizophrenic patients. These determinations were made under basal conditions and after 10 units of intramuscular insulin in a controlled setting.

Comparisons of mean levels of the substances mentioned above revealed no significant differences among any pairs of means, except that the AMP level of chronic schizophrenic patients under basal conditions was significantly lower than that of the control subjects.

Under basal conditions the ATP specific activity of chronic patients was significantly higher than that of the control subjects and acute patients. The ADP specific activity of the chronic schizophrenic group was also higher than that of the other two groups.

Insulin stress increased the specific activity of ATP in the control and acute schizophrenic groups, but decreased it significantly in the chronic patient group. The response to insulin of the chronic schizophrenic group was significantly different from that of the other two groups. The changes in ADP specific activity mirrored the changes in ATP.

Under basal conditions the F1,6P specific activity was significantly lower in the control subjects than in either schizophrenic group. The acute and chronic groups did not differ. Thus, this was the single measure which differentiated schizophrenic from non-schizophrenic subjects. Under insulin stress there was an increase in F1,6P specific activity for the control subjects and a decrease for both schizophrenic groups. These differences in response to insulin were significant.

All the substances measured are involved in biologic energy-transfer systems. Various alternative hypotheses were presented in explanation of the findings. The most likely hypothesis is that in schizophrenia there is a disturbance in the regulation of biologic energy formation and utilization. Further studies are in process to substantiate this evidence and to clarify a pathophysiologic mechanism of schizophrenia.

(Authors' Abstr.)

Effect of Repeated Doses of Insulin on Excretion of Pyrocatecholamines

In summary, it has been demonstrated in mental patients undergoing therapy that repeated administration of insulin results in a markedly diminished response to this hormone, as measured by the output of epinephrine in the urine.

(Authors' Abstr.)

Acquired and Crossed Tolerance to Mescaline, LSD-25 and BOL-148.

It was possible to prove that tolerance to lysergic acid diethylamide (LSD-25) develops very rapidly in man. Tolerance to mescaline also occurs but less rapidly. Subjects tolerant to LSD-25 are very resistant to mescaline effects. Tolerance to mescaline, likewise, seems to be related to a certain resistance to LSD-25 effects. Prolonged administration of 2-bromo-d-lysergic acid diethylamide (BOL-148) does not cause the subject to be resistant to LSD-25. Tachyphylaxis effects to LSD-25 are not visible in man.

(Authors' Abstr.)

The Protein Metabolism in Anorexia Nervosa

A case of anorexia nervosa has been studied for 112 days, with particular reference to the protein metabolism. It is found that administration of large quantities of carbohydrate (61-70 Cal/kg. of body weight) sufficed to reduce the protein loss to a minimum of 0.025 gm. N per kilogram, i.e. 0.16 gm. of protein per kilogram.

In this case, a positive nitrogen balance was obtained, with ingestion of 0.31 gm. of protein per kilogram, or 0.05 gm. N per kilogram, with a caloric intake of 40 Cal/kg.

During the periods of starvation, the nitrogen excretion is found to be considerably greater, amounting to 0.18 gm. N per kilogram, i.e. 1.1 gm. of protein per kilogram of body weight.

The patient had a subnormal temperature and considerably decreased basal metabolism. The importance is stressed of providing nourishment that is as adequate as possible in anorexia nervosa. Protein deficiency is best prevented by administration of large quantities of carbohydrate, as well as the largest possible amount of adequate protein.

(Authors' Abstr.)

VOL. 1	A.M.A. ARCH. NEUR.	JULY, 1959
Acute Intracranial Hypertension. <i>Tarlov, I. M., et al.</i>	3
Morphology of the Neurosecretory Substances. <i>Liss, L.</i>	19
Cerebral Paragonimiasis. <i>Kim, S. K.</i>	30
Cerebral Vasospasm in Angiography for Intracranial Aneurysms. <i>Fletcher, T. M., et al.</i>	38
Rathke-Cleft Cysts. <i>Berry, R. G., and Schlezinger, N. S.</i>	48
³² P Uptake by Normal and Ultrasonically Irradiated Brain Tissue from Cerebrospinal Fluid. <i>Bakay, L., et al.</i>	59
Effect of Spatial Summation on Action of Nociceptive Stimuli on the Cerebral Cortex. <i>Gellhorn, E., and Ballin, H. M.</i>	68
Localization of Function in the Corpus Callosum. <i>Myers, R. E.</i>	74
Bilateral Resections of Frontal Granular Cortex. <i>Orbach, J., and Fischer, G. J.</i>	78
Ictal Emotions Occurring in Temporal Lobe Dysfunction. <i>Weil, A. A.</i>	87
Hypertensive Fibrinoid Arteritis of the Brain and Gross Cerebral Hemorrhage. <i>Feigin, I., and Prose, P.</i>	98
AUGUST		1959
Studies in Alcoholism. <i>Schiller, J., et al.</i>	127
Familial Spastic Paraplegia with Amyotrophy, Oligophrenia and Central Retinal Degeneration. <i>Kjellin, K.</i>	133
Experimental Focal Epilepsy in Animals. <i>Morrell, F.</i>	141
The Transcerebral Venous System. <i>Kaplan, H. A.</i>	148
Hemorrhagic Encephalopathy Induced by Hypernatremia. <i>Luttrell, C. N., et al.</i>	153
Swelling of the Brain Following Ischemic Infarction with Arterial Occlusion. <i>Shaw, C.-M., et al.</i>	161
Encephalopathies of Anoxia and Hypoglycemia. <i>Richardson, J. C., et al.</i>	178
Metastases of Cancer to Primary Intracranial Tumor. <i>Wallach, J. B., and Edberg, S.</i>	191
Protracted Coma from Delayed Thrombosis of Basilar Artery Following Electrical Injury. <i>Haase, E., and Luhan, J. A.</i>	195
Responses of Cats to Tactile and Noxious Stimuli. <i>Hagamen, W. D.</i>	203
Prognosis in Convulsive Disorders. <i>Strobos, R. R. J.</i>	216

- Posterior Interosseous Nerve Palsy with Spontaneous Neuroma Formation. *Whiteley, W. H., and Alpers, B. J.* 226

SEPTEMBER

1959

- Dynamics of Neuromuscular Diseases. *Marinacci, A. A.* 243
 Effects of Lysergic Acid Diethylamide (LSD) on Cortical Sensory Evoked Potentials in the Cat. *Langfitt, T. W., and Finney, L. A.* 258
 Effects of LSD on Cortex of Cat Correlated with Changes in Vital Signs. *Langfitt, T. W., and Finney, L. A.* 269
 Lateralization of Cerebral Lesion and Performance on Spatial-Temporal Tasks. *Heilbrun, A. B., Jr.* 282
 Subcortical Recordings in Temporal Lobe Epilepsy. *Lichtenstein, R. S., et al.* 288
 Serum Lipid and Cholesterol Levels in Cerebrovascular Disease. *Meyer, J. S., et al.* 303
 Cerebellar Pathology in an Infant Resembling Chick Nutritional Encephalomalacia. *Horwitt, M. K., and Bailey, P.* 312
 A Study of Coagulation Factors in Blood and Spinal Fluid in Multiple Sclerosis. *Albright, S. D., et al.* 315

VOL. 64

AM. J. MENT. DEFIC.

JULY, 1959

- Introduction of the President, Dr. George Tarjan. *Westwell, A. E.* 2
 Presidential Address—"Prevention, A Program Goal in Mental Deficiency". *Tarjan, G.* 4
 How Far Have We Come? *Rosenzweig, L. E.* 12
 Progress in Curriculum and Method with Mentally Handicapped Children. *Dawe, A.* 19
 A Private School Curriculum for Trainable Children. *Pollock, M. P.* 24
 A Cottage Training Program for Severely Retarded Children. *Powell, M. F.* 29
 Oral Language for Slow Learning Children. *Irwin, R. B.* 32
 The Therapeutic Use of Music with "Treatment Resistant" Children. *Joseph, H., and Heimlich, E. P.* 41
 Psychiatric Approach to Mental Deficiency. *Kaldeck, R.* 50
 Effects of Prochlorpromazine Therapy on Educability in Disturbed Mentally Retarded Adolescents. *Mitchell, A. C., et al.* 57
 Mental Disorder in the Defective: The Use of Tranquillizers. *Craft, M.* 63
 The Treatment of Cerebral Palsy in Mentally Retarded Patients Using High-Frequency, Low Voltage Electric Currents. *Stimson, C. W.* 72
 Autism in Children with Mental Deficiency. *Bender, L.* 81
 A Survey of Farm and Dairy Operations in Institutions for the Mentally Retarded. *Rosenblum, S., et al.* 87
 Earl's Moron-Battery and Social Adjustment. *Gunzburg, H. C.* 92
 Stimulus Pre-training and the Delayed Reaction in Defectives. *Barnett, C. D., et al.* 104
 Areas of Concept Formation in the Mentally Retarded. *Iscoe, I., and Giller, D.* 112
 An Experimental Study of Directive Group Therapy with Defective Delinquents. *Snyder, R., and Sechrest, L.* 117
 Experimental Modification of Attitudes as a Function of an Institutional Tour. *Cleland, C. C., and Chambers, W. R.* 124
 Psychogalvanic Skin Response Audiometry with Severe Mentally Retarded Children. *Kodman, F., Jr., et al.* 131
 Survey of State Stipend Programs for Psychologists Employed by the State. *Gregory, W.* 137
 The Religious Factor and the Role of Guilt in Parental Acceptance of the Retarded Child. *Zuk, G. H.* 139
 A Procedure for Evaluating Parental Attitudes Toward the Handicapped. *Thurston, J. R.* 148

VOL. 29

AM. J. ORTHOPSYCHIAT.

APRIL, 1959

- Observational Research with Emotionally Disturbed Children: Session I. Symposium, 1958:
1. Introduction. *Prall, R. C.* 223
 2. The Choice of Situation for Observational Studies of Children. *Goodrich, D. W.* 227
 3. On the Locus of Behavior—Observations in Multiple Settings Within Residential Treatment. *Raush, H. L.* 235
 4. Observations of Family Interaction in the Home. *Behrens, M. L., and Sherman, A.* 243
- Changing the Delinquent's Concept of School. Workshop, 1956. *Goldsmith, J. M., et al.* 249
- The Teacher's Role in Creativity. Symposium, 1958:
1. The Problem of Spontaneity, Initiative and Creativity in Suburban Classrooms. *Henry, J.* 266
 2. Premature Structuring as a Deterrent to Creativity. *Biber, B.* 280
 3. Discussion. *Levinger, L.* 291

Learning Problems:

1. Clinical Findings in Reading Disability Children—Special Cases of Intellectual Inhibition. *Silverman, J. S., et al.* 298
 2. Learning Impotence: A Suggested Diagnostic Category. *Rubenstein, B. O., et al.* 315
 3. A Program for Early Intervention in School Phobia. *Waldfogel, S., et al.* 324
 4. Discussion. *Irons, L.* 333
- A Follow-up Evaluation of Cases Treated at a Community Child Guidance Clinic. *Levitt, E. E., et al.* 337
- Contributions of the Mental Hygiene Clinic Team to Clinic Decisions. *Wiener, D. N., and Raths, O. N., Jr.* 350
- The Therapeutic Implications of Supervision. *Burgum, M., et al.* 357
- Orienting Medical Students in the Holistic Approach Through Integrated Teaching: Pediatrics and Child Psychiatry. *Myran, C., and Simon, A. J.* 364
- Meprobamate (Miltown) as an Aid to Psychotherapy in an Outpatient Child Guidance Clinic. *Zier, A.* 377
- Clinical Aspects of Adult Therapy:
1. Notes on the Preoedipal Phantasy. *Glatzer, H. T.* 383
 2. Some Connections Between Sexuality and Ego Organization. *Fried, E.* 391
 3. Discussion. *Silverberg, W. V.* 402
- "Reaching Out" Therapy with Schizophrenic Patients. *Varley, B. K.* 407

JULY

Parents of Schizophrenic Children. Workshop, 1958:

1. Parental Attitudes of Mothers of Schizophrenic, Brain-Injured and Retarded, and Normal Children. *Klebanoff, L. B.* 445
2. The Family of the "Schizophrenic" Child. *Esman, A. H., et al.* 455
3. Four Types of Defense in Mothers and Fathers of Schizophrenic Children. *Kaufman, I., et al.* 460

Present Trends in Schizophrenia Research: Implications for Childhood Schizophrenia. *Werkman, S. L.* 473An Approach to the Investigation of Childhood Schizophrenia: The Speech of Schizophrenic Children and Their Mothers. *Goldfarb, W., et al.* 481The Concept of Pseudopsychopathic Schizophrenia in Adolescents. *Bender, L.* 491

The Interrelatedness of Alcoholism and Marital Conflict. Symposium, 1958:

1. Alcoholism—A Definition and a Note on the Background of Current Research. *Bacon, S. D.* 513
2. The Interaction of Alcoholic Husbands and Their Nonalcoholic Wives During Counseling. *Bullock, S. C., and Mudd, E. H.* 519
3. The Interaction Between Marital Conflict and Alcoholism as Seen Through MMPIs of Marriage Partners. *Ballard, R. G.* 528
4. Interpersonal Perception Theory Applied to Conflicted Marriages in Which Alcoholism Is and Is Not a Problem. *Mitchell, H. E.* 547

Observational Research with Emotionally Disturbed Children: Session II. Symposium, 1958:

1. Direct and Inferential Observations in the Study of Children. *Beller, E. K.* 560
2. Observation and Recording—A Simultaneous Process. *Loomis, E. A., Jr., and Meyer, L. R.* 574
3. Quantification of Obsessional Data in Various Stages of Research. *Haeberle, A. W.* 583
4. Discussion. *Gardner, G. E.* 590

A Test of Some Behavioral Hypotheses Drawn from Alexander's Specificity Theory. *Mednick, S. A., et al.* 592Motivation Mechanisms and Frustration Stereotypes. *Saksida, S.* 599Antisocial Character Disorder: Its Etiology and Relationship to Delinquency. *Berman, S.* 612Acting Out in Adolescence: A Study in Communication. *Levitt, M., and Rubenstein, B. O.* 622The Assessment of Progress in the Treatment of Hyperaggressive Children with Learning Disturbances Within a School Setting. *Newman, R. G.* 633A Pattern of Mother-Son Relationship Involving the Absence of the Father. *Wylie, H. L., and Delgado, R. A.* 644

VOL. 116

AM. J. PSYCHIAT.

JULY, 1959

- Presidential Address. *Gerty, F. J.* 1
- Francis J. Gerty, M.D., Eighty-Fifth President, 1958–1959: A Biographical Sketch. *Braceland, F. J.* 11

Hungarian Refugees: Life Experiences and Features Influencing Participation in the Revolution and Subsequent Flight. <i>Hinkle, L. E., Jr., et al.</i>	16
The Salivary Curve: A Psychiatric Thermometer? <i>Sutherland, G. F.</i>	20
Longitudinal Observations of Biological Deviations in a Schizophrenic Infant. <i>Fish, B.</i>	25
Leprosy and Psychosis. <i>Lowinger, P.</i>	32
Some Psychoanalytic Ideas Applied to Elation and Depression. <i>Lewin, B. D.</i>	38
Therapeutic Factors in Alcoholics Anonymous. <i>Ripley, H. S., and Jackson, J. K.</i>	44
Cerebral Localization: Not Where But in Whom? <i>Pechtel, C., and Masserman, J. H.</i>	51
Undergraduate Psychiatric Education as Reflected in Final Examinations. <i>Watkins, C., and Knight, E.</i>	55
Emotional Content of Suicide Notes. <i>Tuckman, J., et al.</i>	59

AUGUST

1959

Sources of Uncertainty in Studies of Drugs Affecting Mood, Mentation or Activity. <i>Linn, E. L.</i>	97
Difficulties of Comparative Psychiatry: The Fiji Islands. <i>Berne, E.</i>	104
Seven Years of Awakening: 1906-13. <i>Bond, E. D.</i>	110
Rhythms, Cycles and Periods in Health and Disease. <i>DuBois, F. S.</i>	114
The Challenge of Results in Psychotherapy. <i>Stevenson, I.</i>	120
Relationships Among Seizures, Psychosis and Personality Factors. <i>Weinstein, E. A.</i>	124
Psychiatric Orientation and its Relation to Diagnosis and Treatment in a Mental Hospital. <i>Pasamanick, B., et al.</i>	127
Aggression, Guilt and Cataplexy. <i>Levin, M.</i>	133
*The Physiological Basis of the Treatment of Delirium Tremens. <i>Krystal, H.</i>	137
Alcohol in the Iroquois Dream Quest. <i>Carpenter, E. S.</i>	148
A Statistical Study of First Admissions with Psychoneuroses in New York State, 1949-1951. <i>Malzberg, B.</i>	152
Value and Limitations of a Psychiatric Department in a General Hospital in Bombay (India). <i>Vahia, N. S.</i>	158

The Physiological Basis of the Treatment of Delirium Tremens

The current study involved the analysis of 700 cases of D.T., including a review of the causes of death of the 17 patients who succumbed to this illness. Forty-five patients were subjected to a study of their water and electrolyte disturbance.

Delirium tremens was found to be a combination of a physiological disturbance and an emotional stress in an individual whose relation to reality is, at best, tenuous. The particular mental event precipitating delirium was felt to be the "pharmacothymic crisis". The physiological disturbance was found to be varied and consisting of one or more of the following syndromes: (1) Dehydration; (2) Low serum magnesium; (3) Low salt syndrome; (4) Brain swelling. The last two, as well as the lack of resistance to infection, frequently found in delirium tremens, were assumed to be due to an inability to respond to stress. Owing mainly to a chronic vitamin deficiency, the alcoholic is unable to respond with the formation of desoxycorticosterone-like, prothogistic mineral-corticoids.

Methods of clinical diagnosis of the several physiological disturbances involved in delirium tremens were discussed, and suggestions were made to revise the management of this syndrome accordingly.

(Author's Abstr.)

SEPTEMBER

Relation Between History, Personality and Family Pattern and Behavioral Response After Frontal Lobe Surgery. <i>Greenblatt, M.</i>	193
Pavlovian Contemporary Psychiatry in the U.S.S.R. <i>Bykov, K. M.</i>	203
The Significant Variables in Psychopharmaceutic Research. <i>Sherman, L. J.</i>	208
Heller's Disease and Childhood Schizophrenia. <i>Malamud, N.</i>	215
*The Administration of BAS, 5-HTP, and Marsilid to Schizophrenic Patients. <i>Feldstein, A., et al.</i>	219
The Role of Prefrontal Lobe Surgery as a Means of Eradicating Intractable Anxiety. <i>Slocum, J., et al.</i>	222
Criteria for the Selection of a Small Group of Chronic Schizophrenic Subjects for Biological Studies: Special Reference to Psychological (Family Unit) Studies. <i>Perlin, S., and Lee, A. R.</i>	231
The Practice of Psychiatry in England Under the National Health Service. <i>Paterson, A. S.</i>	244
Psychiatric Day Hospitals. <i>Craft, M.</i>	251

The Administration of BAS, 5-HTP, and Marsilid to Schizophrenic Patients

The administration to 5 chronic schizophrenic patients of BAS alone, of BAS and 5-HTP combined, and of BAS and 5-HTP in conjunction with Marsilid was not therapeutically useful. The fact that the patients did not react to the presumed increase in brain serotonin casts doubt upon the hypothesis that too little or too much serotonin is causally related to schizophrenia.

BAS appears to be a monoamine oxidase inhibitor. The conversion of 5-HTP to 5-HIAA was thus prevented resulting in an accumulation of serotonin in urine.

(Authors' Abstr.)

OCTOBER

Durham Plus Five Years: Development of the Law of Criminal Responsibility in the District of Columbia. <i>Watson, A. S.</i>	289
The Placebo Effect in the History of Medical Treatment (Implications for Psychiatry). <i>Shapiro, A. K.</i>	298
Drugs and Psychotherapy. <i>Hoch, P.</i>	305
*Serum Toxicity in Various Psychiatric Disorders. <i>Wortis, J.</i>	309
*Clinical Findings in the Use of Tofranil in Depressive and Other Psychiatric States. <i>Pollack, B.</i>	312
Effect of Trifluoperazine on Auditory Hallucinations. <i>Kruse, W.</i>	318
Current Problems in Dynamic Psychotherapy in Its Relationship to Psychoanalysis. <i>Alexander, F., and Wasserman, J. H.</i>	322
*Sensory Deprivation and Schizophrenia: Some Clinical and Theoretical Similarities. <i>Rosenzweig, N.</i>	326
A Standardised Technique for Modified Electroshock Therapy Using Succinylcholine Chloride. <i>Rose, H. K.</i>	330
Cross Transfusion in Schizophrenia. <i>Nicklin, G., et al.</i>	334
Akathisia. <i>Hodge, J. R.</i>	337
The Reactions of General Practitioners to a Psychiatric Abstracting Service. <i>Garber, R. S., et al.</i>	339
Factors in the Success of a Public Mental Health Program. <i>Linden, M. E., et al.</i>	344

Serum Toxicity in Various Psychiatric Disorders

The serum of schizophrenic, alcoholic, and mongoloid patients had no inhibiting effect on the respiratory activity of surviving rat brain. The serum of patients treated with chlorpromazine enhanced the respiratory activity. A slight tendency to elevated values found in recently admitted schizophrenic adults who were not taking chlorpromazine may be due to prior medication before admission. Phenylketonuric serum depressed brain oxidations, though a similar effect was induced by racemic phenylalanine in concentrations above 40 mg. per cent. as well as by other essential amino acids. It has been suggested that the depressant action of various amino acids may be due not to a direct effect of the amino acids, but to aldehyde formation. It has also been known for a long time that a number of toxic amines such as tyramine, phenylethylamine, mescaline, indole and skatol, all inhibit brain oxidations.

The observed phenomenon may explain the general depression of brain oxidations found *in vivo* in phenylketonuria by Himwich and Fazekas. The low cerebral metabolic rate found in mongoloid children *in vivo* by these authors may be due to the brain pathology associated with the condition.

(Author's Abstr.)

Clinical Findings in the Use of Tofranil in Depressive and Other Psychiatric States

1. Preliminary observation would indicate that Tofranil is a useful drug in the treatment of depressive states. It is not a tranquillizer and, therefore, is of little value in other conditions. It is a promising drug which can be used as an anti-depressant. However, its indication and scope must be studied for a longer period to determine what symptoms respond best to it.

2. The effect of Tofranil in many patients can be increased by the concomitant use of a tranquillizer or a stimulant. In a number of patients Tofranil, by removing the depressive elements, frees and exaggerates anxiety.

3. It can be used in combination with electric shock or after electric shock as a maintenance dose.

4. It is of little value in the treatment of schizophrenics and in paranoid types may often aggravate the condition and break down an unstable equilibrium to which the patient has become adjusted.

5. The combined use of Tofranil and a tranquillizer is helpful in certain psychoneurotic states, associated with anxiety or with reactive depressions.

6. It is of value in the treatment of depressions occurring in the older age group.

7. High doses are unnecessary and the effective range is somewhere between 75 and 150 mg. per day.

8. For the most part, side-effects are minimal, particularly in the younger age group. As one approaches the older age group, the frequency of such side-effects increases, but usually they are more uncomfortable than serious. In patients over 60 there may be a tendency to sudden falls which occur without warning. It is recommended that in older patients the dosage be limited to 75 mg. or less.

9. Side-effects can usually be reduced in frequency or intensity by a reduction in the dosage.

10. Long-term use of the drug is apparently necessary as patients may relapse, at least in the early stages when the drug is prematurely removed. Since the drug is rapidly excreted, it is necessary to give the medication 3 times a day.

(Author's Abstr.)

Sensory Deprivation and Schizophrenia; Some Clinical and Theoretical Similarities

It would seem, in fact, that they now have an experimental model of the schizophrenic syndrome superior to the "model psychoses" induced with mescaline or LSD. Not only will perceptual interference reproduce more closely the primary symptoms of schizophrenia, but these disturbances are caused entirely by external manipulation, without the confusion of a toxic psychosis. While of course they cannot assume that approaches such as these will give them valid answers to all their questions, the author believes they have here an important instrument to help them bridge the gap between the laboratory and the clinic.

(Author's Abstr.)

VOL. 13	AM. J. PSYCHOTHER.	JULY, 1959
Schizophrenic Thought. <i>Arieti, S.</i>	537
Basic Human Motives According to Kurt Goldstein. <i>Piotrowski, Z. A.</i>	553
Theoretical Observations About Life's Basic Tendencies. <i>Buhler, C.</i>	561
Hypnosis and the Concept of the Generalized Reality-Oriented. <i>Shor, R. E.</i>	582
Phantoms, Phantom Pain and "Denial". <i>Simmel, M. L.</i>	603
Ego Weakness, Ego Defenses and Ego Strengthening Techniques. <i>Zucker, L. J.</i>	614
The Individual and the Group. <i>Bieber, T. B.</i>	635
Psychoanalytic Psychotherapy and Casework: Treatment of Choice. <i>Winer, F.</i>	651
VOL. 3	ARCH. CRIM. PSYCHODYN.	1959
The Fallacy of the Impartial Expert. <i>Diamond, B. L.</i>	221
Correction's Sacred Cows. <i>Gill, H. B.</i>	237
Parole Violation and the Early Development of Internal Controls. <i>Shapiro, L. N., et al.</i>	254
Some Psychoanalytic Concepts in Richard Wagner's <i>The Ring of the Nibelung</i> . <i>Levin, I.</i>	260
Is Mr. L. Guilty? <i>Frankenthal, K.</i>	317
Philosophical Cynicism and Criminal Philosophy. <i>Hodges, D. C.</i>	327
The Management of Homicidal Tendencies. <i>Finkelstein, B. A.</i>	339
Contrasting Psychodynamics in Two Types of Psychopathic Behavior: II. A Case of Symptomatic Psychopathy (Part Two). <i>Karpman, B.</i>	349
Mugwump's Paradox: a Conversation. <i>Simonds, R. T.</i>	421
VOL. 82	BRAIN	JUNE, 1959
Excitation and Inhibition in Epilepsy. <i>Symonds, C.</i>	133
Clinical and Electroencephalographic Aspects of Epileptogenic Lesions of the Medial Surface and Superior Border of the Cerebral Hemisphere. <i>Kennedy, W. A.</i>	147
Post-epileptic Paralysis. A Clinical and Experimental Study. <i>Meyer, J. S., and Portnoy, H. D.</i>	162
Expressive Aphasia and Amusia. Following Right Frontal Lesion in a Right-handed Man. <i>Botez, M. I., and Wertheim, N.</i>	186
An Inherited Disease Similar to Amyotrophic Lateral Sclerosis with a Pattern of Posterior Column Involvement. An Intermediate Form? <i>Engel, W. K., et al.</i>	203
Observations on Endocrine Function in Dystrophia Myotonica. <i>Marshall, J.</i>	221
Visual Discrimination Following Successive Temporal Ablations in Monkeys. <i>Ettlinger, G.</i>	232
Changes in Visually Guided Behaviour Following Midsagittal Division of Optic Chiasm and Corpus Callosum in Monkey (<i>Macaca Mulatta</i>). <i>Downer, J. L. de C.</i>	251
Intelligence, Brain Function and the Theory of Mind. <i>Hebb, D. O.</i>	260
Cerebral Dissecting Aneurysms. <i>Wolman, L.</i>	276
VOL. 10	BR. J. DELINQ.	JULY, 1959
The Maryland Defective Delinquency Law. <i>Boslow, H. M., et al.</i>	5
The Psychiatric Treatment of Habitual Criminals. <i>Morrice, J. K. W.</i>	14
Mother-Child Separation and Delinquency. <i>Naess, S.</i>	22
Punishment by the State—Its Motives and Form. <i>Callard, P.</i>	36
Research and Methodology	46
Current Research	46
Opinions of Prisoners about the Application of Penal Law. <i>Rijksen, R.</i>	46
VOL. 50	BRIT. J. PSYCHOL.	AUGUST, 1959
The Solving of Five-Letter Anagram Problems. <i>Hunter, I. M. L.</i>	193
Remembering Advance Cues During Searching. <i>Mackworth, N. H., and J. F.</i>	207
Hue Differences and Brightness Differences as Determinants of Figural After-Effects. <i>Day, R. H.</i>	223

Inter-Sensory Perceptual Set. <i>Talland, G. A.</i>	231
Objective-Test Assessment of the Primary Personality Dimensions in Middle Childhood. <i>Cattell, R. B., and Coan, R. W.</i>	235
Positive and Negative Information in Matching Problems. <i>Donaldson, M.</i>	253
An Interpretation of the "Displacement" Phenomenon. <i>Bindra, D.</i>	263
The Paired Use of Projective Stimuli. <i>Liggett, J.</i>	269
Theories of Anxiety and Hysteria—A Rejoinder to Hans Eysenck. <i>Hamilton, V.</i>	276

VOL. 24 BULL. LOS ANGELES NEUR. SOC. JUNE, 1959

The Art of Taking a Neurological History. Extraction of History and Re-enactment. <i>Nelsen, J. M.</i>	55
*Multiple Sclerosis as an Incidental Complication of a Disorder of Lipid Metabolism:	
I. Close Resemblance of the Lesions Resulting from Fat Embolism to the Plaques of Multiple Sclerosis. <i>Courville, C. B.</i>	60
II. A Survey of the Geographical, Clinical and Biochemical Evidence; The Significance of Endogenous Fat Embolism. <i>Courville, C. B.</i>	77
III. Treatment by Heparin of Acute Exacerbations of the Disease. <i>Courville, C. B.</i>	89
Problems in the Differential Diagnosis of Peripheral Nerve Lesions. The Disconcerting Effects of Multiple Independent Disorders of the Nervous and Muscular Systems. <i>Marinacci, A. A.</i>	106
Gastrointestinal Lesions Associated with Organic Brain Disease. Review of the Literature and Presentation of a Case. <i>Rogers, M. R.</i>	117
Effects of Diodrast on the Pial Circulation. Complications of Carotid Angiography. <i>Russell, F. E.</i>	123

Multiple Sclerosis as an Incidental Complication of a Disorder of Lipid Metabolism: I. Close Resemblance of the Lesions Resulting from Fat Embolism to the Plaques of Multiple Sclerosis

The first phase of this trilogy of studies on the possible genesis of the lesions of multiple sclerosis in a disorder of lipid metabolism is concerned with a case of delayed death incident to fat embolism of the brain. In addition to the expected widespread petechial haemorrhages, there were also found multiple, irregular foci of demyelination and focal necrosis whose gross appearance and distribution were quite reminiscent of the lesions of multiple sclerosis. To further strengthen this impression were the characteristic changes in the foci of demyelination as observed in the microscopic preparations. All of these lesions were apparently the result of lodgment of globules of fat in the small arterioles and capillaries of the white matter of the brain. The total picture presented by these lesions suggested the possibility that the lesions of multiple sclerosis might also be the result of the deposition in the brain of some lipid globules freely circulating in the blood stream. By the lodging of these lipid particles in the small blood vessels of the central nervous system, a clinical picture of this disease could thereby be produced. Additional studies on this point will point out contributing evidence which may lend support to this conception.

(Author's Abstr.)

Multiple Sclerosis as an Incidental Complication of a Disorder of Lipid Metabolism: II. A Survey of the Geographical, Clinical and Biochemical Evidence: The Significance of Endogenous Fat Embolism

In the first of the three papers of this series concerned with the possible aetiology of multiple sclerosis in some disturbance of lipid metabolism, the structural changes in the brain in a case of delayed death after cerebral fat embolism are described. The multiple and widespread embolic lesions consisted of variously-sized and irregularly-contoured foci of demyelination and necrosis as well as the anticipated petechial haemorrhages. Both grossly and microscopically, these lesions were so strikingly reminiscent of the residual plaques of multiple sclerosis that they not only suggested a mechanism of lesion formation (central infarction) but also pointed to a possible underlying cause (a disturbance in lipid metabolism). This second study consists of a three-fold investigation into the fields of geographical distribution of multiple sclerosis, the possibly significant clinical findings, and of the chemical evidence of alterations in the serum lipids which might explain the occurrence of the lesions of multiple sclerosis as well as the pathogenesis of endogenous (non-traumatic) fat embolism. Geographically speaking, multiple sclerosis seems to be more common in countries or areas (northern Europe, the low countries, Germany, Austria, and Switzerland) where the dietary intake of fat is high while, to the contrary, it is relatively rare in those areas (the Orient) in which the quantitative intake of fat is low. Whether the use of saturated versus unsaturated fat plays any important role in this regard is not yet known. From a clinical viewpoint, evidence of a disturbed lipid metabolism in patients with multiple sclerosis is less convincing. Other than for an occasional complaint of a relative intolerance of a heavy fat meal or digestion of fatty foods, about the most suggestive feature of multiple sclerosis in this respect is the progressive deterioration in weight, to terminate in a marked loss in the fatty tissues of the body. The unverified statement that patients on a low-fat diet have fewer and less severe exacerbations

of the disease may also prove to be significant. Experimental support for this possibility lies in the occurrence of a high chylomicron index in the blood serum in the cases of multiple sclerosis (Thienes). There is extant evidence which suggests a mechanism for the formation *in vivo* of endogenous lipid particles large enough to obstruct the small arteries and capillaries of the brain. This mechanism of endogenous fat embolism could, therefore, furnish a source for obstructing micro-embolisms of the white matter capable of producing the plaques of multiple sclerosis. Evidence which would further support this conclusion may be found in a plan of successful treatment during the acute exacerbations of the disease by dissolution of the occluding lipid particles through action of lipases. This aspect of the problem will be considered in the third paper of the series.

(Author's Abstr.)

Multiple Sclerosis as an Incidental Complication of a Disorder of Lipid Metabolism: III. Treatment by Heparin of Acute Exacerbations of the Disease.

This, the third and last paper in a series of studies on multiple sclerosis, attempts an evaluation of a new concept as to causation of this disease. This study has to do specifically with the treatment of the acute exacerbations of this disease with Heparin. This medication is recommended on the theory that the acute phases of multiple sclerosis are the result of lodgment of lipid particles in the arteriocalillary system of vessels of the white matter of the central nervous system. Because even small doses of Heparin are credited by biochemists with the ability to stimulate lipase activity, which should result in an increased breakdown of neutral fats, this substance has been tried in an effort to promote the dissolution of lipid thrombo-embolisms which, according to this hypothesis, are already obstructing these vessels. The apparently favourable results achieved by the present writer in a preliminary trial of repeated intravenous administration of small doses of this medication seems to warrant its further investigation at the hands of others. A regimen is suggested for this purpose.

(Author's Abstr.)

SEPTEMBER

Paraphysial (Colloid) Cysts of the Third Ventricle. Report of Eight Cases with Special Attention to Diagnostic Features. <i>Heaven, R. C., and Young, E. F.</i>	139
Structural Alterations in the Cerebellum in Cases of Cerebral Palsy. Their Relation to Residual Symptomatology in the Ataxic-Atonic Group. <i>Courville, C. B.</i>	148
Myotonia of the Lower Axial Musculature Simulating Lumbar Spinal Nerve Root Lesions. <i>Marinacci, A. A.</i>	166
The Intravenous Use of Urea for Control of Intracranial Hypertension. <i>Marsh, J. S., and Anderson, F. M.</i>	174
Tumor of the Third Ventricle with Amnesia Following Minor Accident. Report of Two Cases. <i>Nielsen, J. M.</i>	180

VOL. 20

DIS. NERV. SYST.

JULY, 1959

Specificity of the Hypocholesterolemic Activity of Nicotinic Acid. <i>Hoffer, A., et al.</i>	286
Clinical and EEG Observations in Patients with Progressive Muscular Dystrophy. <i>Wayne, H. L., and Browne-Mayers, A. N.</i>	288
*Spectrophotometric Studies on Urinary Constituents of Schizophrenic Subjects. <i>Angel, C., et al.</i>	292
Acute Brain Syndrome. <i>Farber, I. J.</i>	296
Trifluoperazine in Anxiety and Tension States. <i>Ernst, E. M.</i>	300
*Dartal in Treatment of Hospitalized Schizophrenic Patients. <i>Laird, D. M., and Hope, J. M.</i>	302
*Convulsive Therapy Without Curarization in Severe Somatic Complications. <i>Friedman, E., et al.</i>	308
Intravenous Use of Tripelennamine Hydrochloride as a Narcotic-like Substitute. <i>Revitch, E., and Weiss, G.</i>	317

Spectrophotometric Studies on Urinary Constituents of Schizophrenic Subjects

1. A urine test is described which has permitted the correct prediction of diagnosis of schizophrenia with results which agree 85 per cent. of the time with the clinical diagnosis of this disorder.

2. Preliminary studies suggest that this test reflects a difference in metabolism of the amino acid, tryptophane.

(Authors' Abstr.)

Dartal in Treatment of Hospitalized Schizophrenic Patients

The results obtained in a controlled experiment to test the effect of Dartal on hospitalized schizophrenic subjects is here reported: One group of subjects received placebos, another group received a commonly-used tranquilizer while a third received Dartal. Although it is immediately apparent that neither Dartal or the commonly employed tranquilizer are cures for the schizophrenic process a favourable response occurred in the overall behaviour of the

patients receiving Dartal which was greater than in the placebo group and in the group which was given the other tranquilizer.

It is apparent that Dartal does not alter the course of the schizophrenic process although it does favourably influence a number of the individual signs and symptoms, i.e. associations, attention, awareness, feeling, mimetic expression, motor activity, speech and interest in work. It is of pertinence to note that three functions which are considered by most psychiatrists to be cardinal manifestations of the schizophrenic process, namely associations, attention and awareness were favourably altered by Dartal with a change approaching the individual norm or baseline. No change in these functions occurred in the group receiving placebos or the group receiving the other active compound.

No deleterious side-effects on blood pressure, liver function or blood forming organs were encountered in the patients receiving Dartal. Two patients receiving Dartal did show what was interpreted as a toxic manifestation consisting of a clinical picture closely resembling a Parkinsonian syndrome. However, this reaction completely disappeared after the drug was discontinued for 48 hours and did not again become manifest when the compound was resumed at a lower dose level.

The results here reported are based on a study of a numerically small group of subjects. There may be some variation in these results when large groups are similarly studied.

(Authors' Abstr.)

Convulsive Therapy Without Curarization in Severe Somatic Complications

The literature was reviewed to emphasize that for more than 15 years E.C.T., *per se*, without pre-medication, was found to be a safe and relatively simple procedure even when severe somatic or skeletal conditions complicated the psychiatric picture. Five cases of severe combined conditions were reported to illustrate this relative safety of unpremedicated E.C.T. where the skeletal, cardiorespiratory, and neurologic status were distinctly vulnerable. It was felt that in these cases curarization might have added to the treatment risk. Additional cases were presented to illustrate that curarization complicated the E.C.T. procedure and in three instances did not prevent the onset of post-treatment coronary thrombosis. These features were discussed in relation to further researches with electrocerebral therapy and in maintenance electroconvulsive therapy of chronic, relapsing psychoses.

The experience and responsibility of the individual psychiatrist should be the determining factor in the management of E.C.T. rather than general or "legal" subjection to complex curarizing anaesthesiologic procedures.

(Authors' Abstr.)

AUGUST (1)

Diagnosis and Treatment of Behavior Disorders in Children. <i>Lytton, G. J., and Knobel, M.</i>	334
Incidence of Fourteen and Six Per Second Positive Spike Discharges in Routine Sleeping EEGs. <i>Glenn, C. G., and Knuth, R.</i>	340
Aids in Diagnosis of Epilepsy in Servicemen. <i>Pierce, C. M., and Lipcon, H. H.</i>	342
Theoretical Considerations in Parkinsonism Induced by Tranquilizing Drugs. <i>Guggenheim, P., and Cohen, L.</i>	346
Treatment in Private Practice. <i>Bedell, S. G.</i>	353
Patient Improvement and Psychiatric Nursing Care. <i>Forrer, G. R., and Grisell, J. L.</i>	357
*Deprol in Depressive Conditions. <i>Rickels, K., and Ewing, J. H.</i>	364
The History and Pharmacology of the Ataractic Drugs. <i>Klotz, M.</i>	365

Deprol in Depressive Conditions

Several new drugs have been introduced recently for the treatment of depressive conditions. Deprol, a combination of meprobamate and benactyzine, interested us because of the previously observed fact that meprobamate alone already possesses certain anti-depressive properties; particularly when administered in dosage higher than usually used in the treatment of anxiety conditions, and when given to patients who exhibit a certain amount of anxiety and tension, even if their psychomotor activity is slightly retarded. The addition of benactyzine is considered to be beneficial as it seems to relieve the ruminative obsessive aspects of the depressive mood.

In the series of patients suffering from varying degrees of depression, Deprol, in conjunction with milieu and various forms of psychotherapy, did benefit a considerable number of patients. The improvement under Deprol consisted mainly in lessening of general depressive mood without euphoria, producing more interest in the surroundings (libido extension), lessening of fear, apprehension, panic and anxiety and marked reduction of irritability, crying spells and insomnia. Patients who manifested marked delusions and hallucinations were least influenced. In a great number of the patients Deprol definitely facilitated psychotherapy while it was much less effective without it.

(Authors' Abstr.)

AUGUST (2)

*Introductory Remarks. <i>Impastato, D. J.</i>	2
*A Pharmacologic Summary of Nialamide. <i>Rowe, R. P.</i>	5
Metabolism Studies with Nialamide. <i>Bloom, B. M., et al.</i>	10

*Transaminase Controlled Nialamide. <i>Robie, T. R., et al.</i>	18
*Nialamide for the Treatment of Anergy and Depression. <i>Vaisberg, M., et al.</i>	22
*Effect of Amine Oxidase Inhibitors on the Conditional Psychogalvanic Reflex in Man. <i>Alexander, L., and Lipsett, S. R.</i>	26
*Treatment of Depressive States in Ambulatory Patients. <i>Ayd, F. J., Jr., et al.</i>	34
*Effectiveness and Tolerance of Nialamide for Geriatric Patients. <i>Mouratoff, G. J., et al.</i>	38
Treatment of Anergic Schizophrenia with Nialamide. <i>Feldman, P. E.</i>	41
A Trial of Nialamide in Chronically Ill Mental Patients. <i>Smith, J. A.</i>	47
Clinical Evaluation of Nialamide in Hospitalized and Non-Hospitalized Patients. <i>Johnson, J. A., Jr.</i>	50
*Clinical Experiences with Nialamide in Depression. <i>Proctor, R. C.</i>	53

Introductory Remarks

Today psychiatrists are about to take a good look at various phases of knowledge on nialamide. All research in medicine is designed to benefit the patient. The practitioner, who ultimately dispenses the agent, is an integral part of the process. Without him, medical research would be pure research and not applied research, as it is intended to be.

Those who have carefully and painstakingly assembled this knowledge, are the most prominent and erudite in their field and everyone is very grateful for their help and philanthropy.

The Eastern Psychiatric Research Association, officially incorporated four years ago, has a membership of nearly 200. This membership, among whom is the President of the American Psychiatric Association, Dr. William Malamud, is made up mainly of practising and research psychiatrists. The chief aim of the Eastern Psychiatric Research Association is the fostering of clinical studies on therapeutic methods, drugs and apparatus in psychiatry; and the presentation and publication thereof. Clinical study is there used in its broadest sense and includes not only the study of the effect of an agent on the patient's clinical condition but also chemical, pharmacologic and cognate investigations, all leading to a sound understanding of the agent, its indications and clinical effects, its chief site of action, its absorption, fate and excretion and its side actions.

At the meeting of the American Psychiatric Association in Philadelphia, a round table discussion entitled "Integration of Somatic Therapies in Psychiatry" the author had occasion to say a few words on electroshock therapy (E.C.T.) and drugs. He made special reference to depressed patients, electroconvulsive therapy and psychic energizers. There is no need to relate the extremely favourable clinical reports on these drugs by many of the original investigators; and of the expressed opinion of some that at last, after 20 years, they see the end of E.C.T. Some of these clinicians have practically abandoned E.C.T. in favour of the psychic energizers. Is this wholesale shift of therapeutic agents justified? Many will answer in the affirmative. But are they sure of their answer? No one will dispute, that today the most efficient and reliable therapeutic agent available for relief of depression is E.C.T. This modality is far more effective than any drug presently available. Its results are quick and long lasting. This cannot be said of the psychic energizers psychiatrists have been using. They yield results slowly, the number benefited is considerably less than with E.C.T. and to prevent relapse the drug has to be given for months upon months.

Since the advent of succinylcholine a few years ago E.C.T. has become the safest treatment in psychiatry. With psychic energizers there has always been the threat of liver damage and possibly death. To guard against this, the patient is subjected to repeated blood counts, urine and liver studies. The long duration of the treatment and the repetition of these tests make the treatment more costly than E.C.T. More important than the cost, is the fact that the patients are not relieved quickly and are subjected to a longer period of suffering.

The originator of E.C.T., Dr. Ugo Cerletti, who was recently in America, expressed the opinion that E.C.T. was a trying treatment and that since its inception he had been attempting to find a substitute. He has experimented with injections of emulsions of shocked pigs' brains. His results have been encouraging but not conclusive. Psychiatrists have, for a long time, wished that some day they might have an injection or a drug which would give comparable results to E.C.T. in both percentage of cures and rapidity and duration of improvement. Until such a drug becomes available they should not delude themselves by being over enthusiastic about any agent less effective than E.C.T. They should not become second-rate therapists: second rate because they are afraid to use an agent known definitely to be superior and substitute in its stead a second-best agent. Psychiatrists do hope that nialamide, now to be discussed, will prove to be the agent which they are looking for. Should this not be so, it is hoped that these studies will lead them to discover specific indications for its use at least in certain patients. They should be careful and conservative in passing judgment on any therapeutic agent; for undeserved over-enthusiasm may guillotine any beneficial effect it may have.

(Author's Abstr.)

A Pharmacologic Summary of Nialamide

Nialamide has been found to be a potent, specific, relatively non-toxic antidepressant with important features from a clinical point of view, that is, no adverse effect on liver function or postural hypotensive activity.

(Author's Abstr.)

Transaminase Controlled Nialamide

This report is concerned with the use of nialamide in 23 patients with various mental disturbances. These include reactive depression, manic-depressive insanity, involuntional melancholia, schizophrenia, psychopathic personality and barbiturate addiction.

On the basis of recent experience, it can be stated that nialamide is a good amine oxidase inhibitor which will induce remission of depression and apparently is free from serious side-effects.

Dosages with amine oxidase inhibitors were adjusted to levels that would not produce serious liver damage. This was done by means of sodium glutamic-oxaloacetic transaminase (SGO-T) determinations.

(Authors' Abstr.)

Nialamide for the Treatment of Anergy and Depression

The psychic stimulant, nialamide, in a study with 26 hospitalized patients was found to be therapeutically effective, comparable to previously investigated monoamine oxidase inhibitors. Nialamide was markedly effective in alleviating depression and/or anergy in 16 persons, restoring them to a higher level of psychic integration. Of the 16 cases, three were classed as recovered, five as much improved, and eight as improving. One patient showed sporadic improvement and nine were either unimproved or worse with nialamide. Side-effects were anxiety and akathisia in a total of four patients which were quickly relieved by concomitant administration of phenothiazines. Four patients experienced either a mild nausea and headache, transitory choreic movements, a syncopal attack or transitory diarrhoea. There was a slightly elevated BUN in one case. Later studies showed a transitory rise of alkaline phosphatase in one patient. There was no relief of pain in one case of angina pectoris. Evidence of postural hypotension was encountered in one patient. Nialamide appears to have little of any potentiating effect on other phrenotropic drugs. There were no serious untoward effects observed in this study. In addition to alleviation of the anergy and/or depression in 16 patients, there was a complete loss or marked lessening of delusional and hallucinatory content in nine of these.

From the data obtained in this exploratory study with nialamide, it is apparent that this monoamine oxidase inhibitor is a safe, fairly rapid antidepressive and alerting agent; plus beneficial effects on ideation and perception. It alleviated the symptoms in approximately 60 per cent. of hospitalized depressed and anergic patients without apparent relationship to the diagnostic category, the number of previous admissions, the duration of the present illness, the age of the patient, or the severity of the anergy or depression.

(Authors' Abstr.)

Effect of Amine Oxidase Inhibitors on the Conditional Psychogalvanic Reflex in Man

1. Successful response to treatment with amine oxidase inhibitors is associated with diminution in magnitude of the conditional psychogalvanic reflex responses without alteration in differentiation. In most cases the unconditional psychogalvanic reflex is diminished as well.

2. The neurophysiologic and psychophysiological implications of this finding are discussed.

3. The diminution of the conditional psychogalvanic reflexes is related to dosage, duration of administration and treatment results.

4. Testing of the conditional psychogalvanic reflex is recommended as a means of evaluating adequacy of dosage with amine oxidase inhibitors.

(Authors' Abstr.)

Treatment of Depressive States in Ambulatory Patients

Nialamide, an amine oxidase inhibitor, is a new antidepressant which was prescribed for 100 ambulatory patients (ages 22 to 72) whose essential complaints were depressive symptoms. There were 32 manic-depressives, 17 involuntional melancholics, 15 schizophrenics with depressive features and 36 neurotic depressives in this study.

Severely depressed individuals were started on nialamide 25 mg. three times a day and moderately ill patients were given 10 mg. three or four times daily. If after one week there was no improvement the dosage was increased by increments of 10 to 25 mg. a day until improvement occurred or until the dosage was 200 mg. daily.

Phenothiazine tranquilizers and barbiturates were combined with nialamide whenever the depression was accompanied by anxiety, agitation, panic, anorexia and insomnia, marked psychosomatic symptoms, paranoid colouring, or when the depression immediately followed physiological or psychological shock. This combined treatment also was prescribed routinely for all depressed schizophrenics.

Nialamide was given in conjunction with E.C.T. to 16 suicidal patients. This combined treatment was safe but did not reduce the number of shock treatments required.

Side-effects such as headaches (10 per cent.), dry mouth (4 per cent.), sweating (4 per cent.), dizziness (3 per cent.), constipation (3 per cent.), blurred vision (2 per cent.), hypotension (2 per cent.), epigastric distress (1 per cent.) and oedema (1 per cent.) occurred with doses in excess of 100 mg. daily. These were mild and did not necessitate the discontinuation of nialamide. This drug did not cause postural hypotension nor many of the other side-effects produced by other antidepressants.

At the end of eight weeks nialamide therapy 21 patients were improved and 30 were partially improved. Of the 49 treatment failures, 29 patients had a good prognosis and 20 had a poor prognosis. To achieve therapeutic benefit 50 to 75 mg. of nialamide daily was necessary. An occasional patient required as much as 150 mg. daily. Larger doses did not increase therapeutic benefit but were likely to produce side-effects.

Although therapeutically active, nialamide is somewhat less effective than other anti-depressants used for the same target symptoms and assessed by similar criteria for benefit. On the other hand because nialamide is well tolerated by patients in every age group and particularly because it apparently does not cause postural hypotension it is safe for the treatment of ambulatory depressed patients by general practitioners and specialists other than psychiatrists.

(Authors' Abstr.)

Effectiveness and Tolerance of Nialamide for Geriatric Patients

Nialamide was studied in three groups of patients to establish dosage, effectiveness and safety. In depressed geriatric hospitalized patients, 25 mg. three times daily is sufficient for therapeutic effectiveness with minimal occurrence of untoward reactions. For agitated hospitalized patients and ambulant patients with the anxiety state, nialamide was not found effective with the 75 mg. dose used.

(Authors' Abstr.)

Clinical Experiences with Nialamide in Depression

What conclusions can be drawn from this series of 50 cases? First, nialamide seems to offer considerable promise in the treatment of certain depressive reactions. It seems most useful in the treatment of neurotic-depressive reactions in patients under 50, and it is of benefit in some patients with depressions of the manic-depressive type. In the older patients suffering from depression, it seems more useful in males than in females. I am unable to explain these differences clinically. Nialamide is remarkably non-toxic as side-effects are very few and minimal. Certainly nialamide seems to be a useful addition to the psychopharmacologic armamentarium.

(Author's Abstr.)

SEPTEMBER

Differential Response of Schizophrenic and Other Psychiatric Patients to Atropine. <i>Hoffer, A., and Callbeck, M. J.</i>	387
*Treatment of Depressions in Private Practice with Imipramine. <i>Ruskin, D. B., and Goldner, R. D.</i>	391
Electrocardiographic Non-Specific T Wave Changes in Psychiatric Patients. <i>Sweeney, G. H., et al.</i>	400
Clinical Experience with Fluphenazine. <i>Niswander, G. D., and Karacan, I.</i>	403
Comparison of Autopsy and Clinical Diagnosis on Psychiatric Patients. <i>Rothfeld, B.</i>	406
*A Clinical Study of the Anticonvulsant Properties of Meratran. <i>Ott, R. E., and McMaster, R. H.</i>	409
Basic Statistical Concepts in Medical Research. <i>Ayres, C. M.</i>	414
Psychiatric "Pointers" for the General Practitioner and Internist Treating Psychosomatic Diseases. <i>Bergler, E.</i>	420
Vocational Rehabilitation as a Therapeutic Tool. <i>Toppen, J. T., and Wolfe, H. E.</i>	425
Combined Effects of Chlorpromazine and Meprobamate in Chronically Disturbed Psychotic Patients. <i>Pollard, J. C.</i>	427

Treatment of Depressions in Private Practice with Imipramine

There were 305 patients in 369 diagnostic entities, given imipramine in dosages varying from 25 mg. to 200 mg. daily. Patients were selected on the basis of the presence of depression or symptoms indicative of a basic depression. Other therapies were used as indicated.

Improvement varied from 36.75 per cent. in those patients who received an initial daily dosage of 25 mg. to 71.4 per cent. in those patients receiving an initial daily dosage of 100 mg. Only those patients who were able to return to their former state of relative well-being were considered improved. The majority of patients were able to discontinue medication in six months, others needed continuation of medication over a period of two years. These latter patients were usually able to continue their state of improvement on a reduced dosage.

Side-effects were generally mild and did not contradict the continuation of the medication. The more severe reactions usually responded to reduction of dosage or by the administration of a tranquillizer.

On the basis of the results obtained, imipramine has excellent properties as an anti-depressant without serious side-effects.

(Authors' Abstr.)

A Clinical Study of the Anticonvulsant Properties of Meratran

A group of 40 epileptic patients who had previously received only phenobarbital as an anticonvulsant were divided into two comparable groups in regard to age, I.Q. and sex. One

group was given Meratran therapy; both groups continued phenobarbital therapy at the same dosage level they had been receiving prior to this study.

Statistical analyses indicate that clinically Meratran exhibits a significant anticonvulsant effect and simultaneously overcomes some of the soporific effects of phenobarbital.

Further indications of the anticonvulsant activity of Meratran were found clinically in a small group of patients who had received combinations of phenobarbital and one or more of the other anticonvulsants prior to and during Meratran therapy. The greatest reduction in seizures during treatment with Meratran occurred in this group.

Central stimulating effects of Meratran therapy, when present, were for the most part favourable: increased alertness, less drowsiness, increased motor activity. Undesirable side-effects occurred in two patients whose pre-Meratran psychiatric condition indicated a tendency to anxiety or hallucinations.

(Authors' Abstr.)

VOL. 11 EEG CLIN. NEUROPHYSIOL. AUGUST, 1959

Hippocampal Electrical Activity During the Development of Conditioned Reflexes. <i>Grastyán, E., et al.</i>	409
Hippocampal and Neocortical Activity in Different Experimental Conditions. <i>Tokizane, T., et al.</i>	431
Cerebello-hippocampal Influences on the Electroencephalogram. <i>Iwata, K., et al.</i>	439
Studies on the Supracallosal Mesial Cortex of Unanesthetized, Conscious Mammals. I. Cat. A. Movements Elicited by Electrical Stimulation. <i>Hughes, J. R.</i>	447
Studies on the Supracallosal Mesial Cortex of Unanesthetized Conscious Mammals. I. Cat. B. Electrical Activity. <i>Hughes, J. R.</i>	459
Conditioning of Reticular Formation Stimulation Effects. <i>Segundo, J. P., et al.</i>	471
Defensive Conditioning of Electrographic Arousal with Delayed and Differentiated Auditory Stimuli. <i>Gluck, H., and Rowland, V.</i>	485
The Blocking of the Rolandic Wicket Rhythm and Some Central Changes Related to Movement. <i>Chatrian, G. E., et al.</i>	497
Provocation of Electroencephalographic Changes in the Temporal Region by Intermittent Acoustic Stimuli. <i>Precht, H. F. R.</i>	511
Electrocorticographic Changes in Temporal Lobe Epilepsy at Rest and During Induced Sleep. <i>Rovetta, P.</i>	521
Analysis of Cerebral Responses to Flicker in Patients Complaining of Episodic Headache. <i>Golla, F. L., and Winter, A. L.</i>	539
Evidence for the Existence of an Electroencephalographic Synchronization Mechanism Originating in the Lower Brain Stem. <i>Cordeau, J. P., and Mancía, M.</i>	551

VOL. 1 EPILEPSIA MARCH, 1959

The Cortical Control of Movement—A Contribution to the Surgical Physiology of Seizures. <i>Wyke, B. D.</i>	4
The Contribution of Patho-anatomical Research to the Problem of Epilepsy. <i>Scholz, W.</i>	36
A Correlation of Clinical, Electroencephalographic and Anatomical Findings in Nine Autopsied Cases of "Temporal Lobe Epilepsy". <i>Gastaut, H., et al.</i>	56
The Effects of Convulsive and Anesthetic Agents on Steady Cortical Potential. <i>Goldring, S., and O'Leary, J. L.</i>	86
Phylogenetic Development of Susceptibility to, and Symptomatology of, Epileptic Seizures. <i>Servit, Z.</i>	95
Celontin—A New Anticonvulsant. <i>Scholl, M. L., et al.</i>	105
Ethchlorvynol in the Treatment of Mixed Grand and Petit Mal Epilepsy. <i>Carter, C. H.</i>	110
Serum Mucoproteins in Progressive Familial Myoclonic Epilepsy (A Preliminary Note). <i>Millar, J. H. D., and Neill, D. W.</i>	115

VOL. 1 EX. NEUROL. AUGUST, 1959

Histologic Connections and Electrical and Autonomic Responses Evoked by Stimulation of the Dorsal Fornix in the Rabbit. <i>Cragg, B. G., and Hamlyn, L. H.</i>	187
Acute Cerebral Changes in Experimental Canine Fat Embolism. <i>Cammermeyer, J., and Swank, R. L.</i>	214
Electrophoretic Studies of Central Nervous System Proteins. <i>Lowenthal, A., et al.</i>	233
Vestibular Influences on Spinal Mechanisms. <i>Gernandt, B. E., et al.</i>	248
Descending Vestibular Activity and Its Modulation by Proprioceptive, Cerebellar, and Reticular Influences. <i>Gernandt, B. E., and Gilman, S.</i>	274

VOL. 60 GENET. PSYCHOL. MONOGR. AUGUST, 1959

The Constancy of Personality Ratings Over Two Decades. <i>Tuddenham, R. D.</i>	3
Mother-Son Identification and Vocational Interest. <i>Stewart, L. H.</i>	31
A Study of Mother-Child Relationships in the Emotional Disorders of Children. <i>Rosenthal, M. J., et al.</i>	65
On the Trail of the Wolf-Children. <i>Ogburn, W. F., and Bose, N. K.</i>	117

- A Circumplex Model for Maternal Behavior. *Schaefer, E. S.* .. 226
 Personality Determinants of Repressive and Obsessive Reactions to Failure-Stress.
Caron, A. J., and Wallach, M. A. .. 236
 The Effects of Chlorpromazine on GSR Conditioning. *Mitchell, L. E., and Zax, M.* .. 246
 Selectivity in Exposure to Information. *Mills, J., et al.* .. 250
 The Effect of Verbal Reinforcement on the Recall of Early Memories. *Quay, H.* .. 254
 The Effects of Father-Absence on Norwegian Boys and Girls. *Lynn, D. B., and
 Sawrey, W. L.* .. 258
 The Effect of Aversive Stimuli on Reaction Time in Schizophrenia. *Lang, P. J.* .. 263

VOL. 110 COMP. NEUR. DECEMBER, 1958

- Cerebellar Stimulation in the Unanesthetized Bullfrog. *Goodman, D. C.* .. 321
 The Behavioral Effects of Destructive Lesions of the Periaqueductal Gray Matter in
 Adult Cats. *Skultety, F. M.* .. 337
 Origin of Ciliary Ganglia in the Chick. *Hammond, W. S., and Yntema, C. L.* .. 367
 The Termination of Primary Vestibular Fibers in the Vestibular Nuclei in the Cat.
 An Experimental Study with Silver Methods. *Walberg, F., et al.* .. 391
 On the Functional Connections of Single Units in the Central Nervous System of the
 Crayfish, *Procambarus clarkii* Girard. *Wiersma, C. A. G.* .. 421

VOL. 111 FEBRUARY, 1959

- Anatomical Connections Between the Fastigial Nuclei, the Labyrinth and the Vestibular
 Nuclei in the Cat. *Carpenter, M. B., et al.* .. 1
 Stages in the Development of the Anatomy of Motility of the Toadfish (*Opsanus tau*).
Tracy, H. C. .. 27
 Cell Types in the Myenteric Plexus of the Cat. *Gunn, M.* .. 83
 The Effects of Certain Neural Lesions in the Rat on the Reaction to a Noxious Stimulus.
 I. The Limbic Region. *Lyon, M., and Harrison, J. M.* .. 101
 The Effects of Certain Neural Lesions in the Rat on the Reaction to a Noxious Stimulus.
 II. Septal Nuclei and Fornix Components. *Lyon, M., and Harrison, J. M.* .. 115
 The Thalamus of the Dolphin (*Tursiops truncatus*) and Comparison with Other
 Mammals. *Kruger, L.* .. 133

VOL. 52 J. COMP. PHYSIOL. PSYCHOL. JUNE, 1959

- Absence of Deficits in Taste Discrimination Following Cortical Lesions as a Function
 of the Amount of Preoperative Practice. *Benjamin, R. M.* .. 255
 The Relative Taste Effectiveness of Different Sugars for the Rat. *Hagstrom, E. C., and
 Pfaffmann, C.* .. 259
 Early Experience and Taste Aversion. *Warren, R. P., and Pfaffmann, C.* .. 263
 The Effect of Experience with a Taste Reward. *Wetzel, R. J.* .. 267
 The Effect of Lesions of the Superior Colliculus on Brightness and Pattern Dis-
 criminations in the Cat. *Blake, L.* .. 272
 Factors Influencing Identification of the Handedness Area in the Cerebral Cortex of the
 Rat. *Peterson, G. M., and Gucker, D. K.* .. 279
 Stability of EEG Activity and Manifest Anxiety. *Johnson, L. C., and Ulett, G. A.* .. 284
 The Effect of Peripherally Induced Shifts in Water Balance on Eating. *Smith, M., et al.*
 .. 289
 Resistance to Extinction Following Cranial Self-Stimulation. *Seward, J. P., et al.* .. 294
 The Effect of Inherited Differences in Emotional Reactivity on a Measure of Intelligence
 in the Rat. *Das, G., and Broadhurst, P. L.* .. 300
 Studies in Experimental Behavior Genetics: II. Individual Differences in Geotaxis as a
 Function of Chromosome Variations in Synthesized *Drosophila* Populations.
Hirsch, J. .. 304
 Somatic Activity Under Reduced Stimulation. *Davis, R. C.* .. 309
 Methodological Study of Vasomotor Conditioning in Human Subjects. *Shmavonian,
 B. M.* .. 315
 The Effect of Chlorpromazine on the Brightness Discrimination of Rats with Habits
 and Fixations. *Feldman, R. S., et al.* .. 322
 Response Shift as a Function of Overtraining and Delay. *Stevenson, H. W., and
 Weir, M. W.* .. 327
 Novelty Learning Sets in Rhesus Monkeys. *Brown, W. L., et al.* .. 330
 Memory for Object Discriminations in the Rhesus Monkey. *Strong, P. N., Jr.* .. 333
 Transfer Relations in Discrimination Learning by Cats. *Warren, J. M., and Kimball, H.*
 .. 336
 Acquired Distinctiveness of Form Stimuli. *North, A. J.* .. 339
 Discrimination Learning as a Function of the Probability of Reinforcement. *North, A. J.,
 and McDonald, R. D.* .. 342
 Conditional Discrimination in a Runway Situation. *North, A. J., and Black, C. J., Jr.*
 .. 345
 Choice Behavior and Differential Response Strength in Discrimination Reversal
 Learning. *Davenport, J. W.* .. 349
 Sustained Performance in Rats Based on Secondary Reinforcement. *Zimmerman, D. W.*
 .. 353

- Changes in S^D and in S^Δ Rates During the Development of an Operant Discrimination. *Herrick, R. M., et al.* 359
 Response Decrement in Visual Exploratory Behavior. *Rabedeau, R., and Miles, R. C.* 364
 The Relative Importance of Experimenter Contact in an Effect Produced by Extra-stimulation in Infancy. *Seymour, L., and Lewis, G. W.* 368
 Social Conditioning in Rats. *Angermeier, W. F., et al.* 370
 Modification of Social Rank in the Domestic Fowl. *Smith, W., and Hale, E. B.* . . 373
 Factors Influencing Aggression of Neonatal Puppies. *Welker, W. I.* 376

VOL. 15

J. CLIN. PSYCHOL.

JULY, 1959

- Introduction. *Humber, W. J.* 235
 The Psychologist as Administrator. *Hobbs, N.* 237
 Administrative Opportunities for Psychologists in State Mental Health Programs. *McKee, J. M.* 241
 Personnel Problems of Psychologists in Mental Health Administration. *McCullough, M. W.* 244
 Administrative Issues for the Psychologist as Director of a Community Guidance Center. *Brewer, J. E.* 249
 The Administrative Role of a Chief Psychologist in a Medical Setting. *Horowitz, M. J.* 252
 An Operational Approach to the Diagnosis of Levels of Personality Integration or Psychopathology. *Thorne, F. C.* 255
 The Psychiatric Attitudes Battery: A Procedure for Assessing Attitudes Toward Psychiatric Treatment and Hospitals. *Reznikoff, M., et al.* 260
 Life History Correlates of Delinquent and Psychopathic Behavior. *Cline, V. B., and Wangrow, A. S.* 266
 The Questionable Validity of Some Assumed Antecedents of Mental Illness. *Hovey, H. B.* 270
 Multidisciplinary Views on the Preparation of Written Clinical Psychological Reports. *Tallent, N., and Reiss, W. J.* 273
 A Short Screening Test for Organic Deficit. *Butz, G. K., et al.* 274
 The Comparative Effects of Brain Damage on the Halstead Impairment Index and the Wechsler-Bellevue Scale. *Reitan, R. M.* 281
 Predicting Potential Intelligence. *Thorp, T. R., and Mahrer, A. R.* 285
 A Comparison of the Coloured Progressive Matrices (CPM) with the Wechsler Adult Intelligence Scale (WAIS) in a Normal Aged White Male Population. *Levinson, B. M.* 288
 Maternal Attitudes and Children's Intelligence. *Hurley, J. R.* 291
 Tables to Facilitate the Comparison of Sub-Test Scores on the WISC. *Maxwell, A. E.* 293
 A Comparative Analysis of Selected Guilford-Zimmerman Temperament Survey Scales with the Taylor Manifest Anxiety Scale. *Linden, J. D., and Olson, R. W.* . . . 295
 Relation of Manifest Anxiety to Specific Problem Areas. *Hammes, J. A.* 298
 Manifest Anxiety in Hospitalized Children. *Kaplan, A. M., and Hafner, A. J.* . . . 301
 Defensiveness and Unwitting Self-Evaluation. *Rogers, A. H., and Walsh, T. M.* . . 302
 A Research Note on the K Scale of the MMPI and "Defensiveness". *King, G. F., and Schiller, M.* 305
 The Validity of the Taulbee-Sisson MMPI Scale Pairs in Female Psychiatric Groups. *Loy, D. L.* 306
 Threat and Direction of Aggression. *Trapp, E. P.* 308
 A Validity Test of Self-Ideal Discrepancy. *Griggs, A. E.* 311
 Influence of Social Desirability upon Rorschach Content. *Pena, C. D.* 313
 The Projection of Hostility on the Rorschach and Thematic Stories Test. *Murstein, B. I., and Wheeler, J. I., Jr.* 316
 A Clinical Evaluation of Eysenck's "Objective Rorschach". *Rosen, A. C.* 320
 A Study of Incidental Stimulus Values in the Szondi Test. *Hamilton, J. T.* 322
 Clinical Psychologist's Diagnostic Utilization of Human Figure Drawings. *Arbit, J., and Lakin, M.* 325
 The Relationship between TAT Responses and Leaving-the-Field Behavior. *Phares, E. J.* 328
 The New Principle of Psychotherapy. *Borgatta, E. F.* 330
 The Effect of Arbitrary Termination on Return to Psychotherapy. *Wiener, D. N.* . . 335
 A Homosexual Treated with Rational Psychotherapy. *Ellis, A.* 338
 Initial Complaints as Predictors of Continuation in Psychotherapy. *Hiler, E. W.* . . 344
 Social Status and Clinic Contact. *Tuckman, J., and Lavell, M.* 345
 Auditory Interference with Digit Span Performance. *Guertin, W. H.* 349

OCTOBER

1959

- Personality Structure in Four and Five Year Olds in Terms of Objective Tests. *Cattell, R. B., and Peterson, D. R.* 355
 The Meaning of a Positive Self-Concept. *Jervis, F. M.* 370
 Difference between Neurotics, Psychotics and Normals on Perceptual Tests: Reanalysis of Eysenck's Results. *Vandenberg, S. G.* 373
 Homosexuality and Creativity. *Ellis, A.* 376
 Judging the Relative Severity of Psychiatric Out-Patient Complaints. *Schaie, K. W., et al.* 380

The Comparative Reliability of Two Techniques of Personality Appraisal. <i>Horst, P., and Wright, C. E.</i>	388
Reliability of Diagnostic Judgments Made by Psychologists. <i>Goldfarb, A.</i>	392
The Validity of Clinical Judgments of Schizophrenic Pathology Based on Verbal Responses to Intelligence Test Items. <i>Jones, N. F., Jr.</i>	396
A Comparison of Random and Judgmental Methods of Determining Mode of Out-patient Mental Hygiene Treatment. <i>Garetz, F. K., et al.</i>	401
A Comparison of Parental and Self-Evaluations of Psychopathology in Children. <i>Levitt, E. E.</i>	402
Standardization of the Children's Picture Information Test. <i>Kogan, K. L., and Crager, R. L.</i>	405
The Pain Apperception Test: An Application to Sex Differences. <i>Petrovich, D. V.</i>	412
An Analysis of Gross Errors on a Sentence Completion Test. <i>Guertin, W. H.</i>	415
Deviant Responses as Indicators of Immaturity and Neuroticism. <i>Roitzsch, J. C., and Berg, I. A.</i>	417
An Internal Consistency Analysis of the Forced Choice Anxiety Scale. <i>Hammes, J. A., and Young, E. D.</i>	420
Formboard Comparability in the Colored Progressive Matrices. <i>Jordan, T. E.</i>	422
A Short Form of the Wechsler Intelligence Scale for Children. <i>Simpson, W. H., and Bridges, C. C., Jr.</i>	424
Base Rate Data on Rorschach Card Rejection. <i>McKeever, W. F., and Gerstein, A. I.</i>	425
MMPI Profiles of Parents of Child Psychiatric Patients. <i>Hanvik, L. J., and Byrum, M.</i>	427
Changes in Recognition Thresholds Associated with Chlorpromazine, Promazine and Phenobarbital. <i>Efron, H. Y.</i>	431
Effects of Morphine and Pentobarbital on Differential MMPI Profiles. <i>Haertzen, C. A., and Hill, H. E.</i>	434
Intellectual Changes Following Frontal Lobe Procainization. <i>Paolino, A. F., and Friedman, I.</i>	437
Anxiety and Socio-Economic Stratification. <i>Lotsof, E. J., and Centers, R.</i>	439
A Study of Factors Related to Length of Stay in Psychotherapy. <i>Bailey, M. A., et al.</i>	443
Multidisciplinary Views on the Preparation of Written Clinical Psychological Reports: III. The Trouble with Psychological Reports. <i>Tallent, N., and Reiss, W. J.</i>	444
Some Cautions Concerning the Use of Change Scores. <i>Heilizer, F.</i>	447
The Effect of Tied Ranks on the Rank Order Correlation. <i>Heilizer, F.</i>	450
Hypochondriasis and Somatic Seizure Auras. <i>Aaronson, B. S.</i>	450
The Shipley-Hartford Scale and the Doppelt Short Form as Estimates of WAIS I.Q. in a State Hospital Population. <i>Sines, L. K., and Simmons, H.</i>	452

VOL. 94

J. GENET. PSYCHOL.

JUNE, 1959

Self-confidence, Ability, and the Interest-Value of Tasks. <i>Rychlak, J. F.</i>	153
Comparing the Effectiveness of the Ego-Strength <i>Q</i> -Sort Test by Use of <i>R</i> - and <i>Q</i> -Methodologies. <i>Cassel, R. N.</i>	161
A Developmental Analysis of Proverb Interpretations. <i>Richardson, C., and Church, J.</i>	169
Anxiety Reduction and Novelty as Goals of Visual Exploration by Monkeys. <i>Symmes, D.</i>	181
Behavior of the Opossum in the Fink Arrow Maze. <i>James, W. T.</i>	199
The Effects of Long-term Hospitalization or Institutionalization Upon the Language Development of Children. <i>Haggerty, A. D.</i>	205
The Relation Between Pre-Irradiation Volitional Activity and Post-Irradiation Death Order in the Rat. <i>McDowell, A. A., and Brown, W. L.</i>	211
Parallel Observations on Avoidance Behavior and Endocrine Response Under Reserpine. <i>Coslett, S. B., and Shaklee, A. B.</i>	215
Conceptual Block Sorting as a Function of Number, Pattern of Assignment, and Strength of Labeling Responses. <i>Lacey, H., and Goss, A. E.</i>	221
Infantile Illness and Subsequent Mental and Emotional Development. <i>Stott, D. H.</i>	233
Immanent Justice in Children: A Review of the Literature and Additional Data. <i>Medinnus, G. R.</i>	253
The Influence of Auditory Stimulation on Aniseikonic Perception: II and III. Business School Women and College Women. <i>Simpson, J. E.</i>	263
Rorschach Indices of Developmental Level. <i>Phillips, L., et al.</i>	267
The Function of Verbal Labels in the Discrimination of Subtle Stimulus Differences. <i>Albert, R. S.</i>	287

VOL. 61

J. GEN. PSYCHOL.

JULY, 1959

Recollections of a Magic Decade at Clark: 1925-1935. <i>Murchison, C.</i>	3
Psychology and Value: A Critique of Morris' Approach to Evaluation as Behavior. <i>Winthrop, H.</i>	13
Measure of Similarity in Work Curves. <i>Rath, R.</i>	39
The Effects of Anchors on Apparent Length. <i>Boardman, W. K., et al.</i>	45
Factors Affecting Conceptual Perception in Reading. <i>Thayer, L. O., and Pronko, N. H.</i>	51

Latent Effects of Chronic Whole-Body Irradiation Upon the Performance of Monkeys on the Spatial Delayed-Response Problem. <i>McDowell, A. A., and Brown, W. L.</i>	61
Experimental Manipulation of Verbal Behavior: A Review. <i>Salzinger, K.</i>	65
Effects of Speed-Stress and Display-Control Relationships on Response Discrimination. <i>Woessner, B. L., et al.</i>	95
The Effect of Chronic Whole-Body Irradiation on Peripheral Cue Associations. <i>Brown, W. L., et al.</i>	113
The Effect of Sustained Novelty Upon Manipulation in Rhesus Monkeys. <i>Carr, R. M., and Brown, W. L.</i>	121
Punched-card Methods for Item Analysis in the Development of Structured Personality Scales. <i>Rosen, A.</i>	127
A Model Dealing with Degrees of Consciousness. <i>Bayard, J.</i>	137
Conditioned Food Avoidance on a T-Maze in Irradiated Rats. <i>White, R. K., and Brown, W. L.</i>	151
Anxiety as Drive and Reactive Inhibition. <i>Hunt, W. L.</i>	159
Fear, Anxiety, and the Perception of Others. <i>Davitz, J. R.</i>	169

VOL. 128

J. NERV. MENT. DIS.

MAY, 1959

*The Contributions of Enzymology to Neurochemistry. <i>Quastel, J. H.</i>	381
Right-Left Body Reactivity Patterns in Disorganized States. <i>Fisher, S., and Cleveland, S. E.</i>	396
Sterility and the Magic Power of the Maternal Figure. <i>Blum, L. H.</i>	401
*The Effect of LSD on the Associative Processes. <i>Weintraub, W., et al.</i>	409
Thyrotoxicosis and Its Psychosomatic Approach. <i>Philippopoulos, G. S.</i>	415
On the Reliability of Clinical EEG Interpretation. <i>Houfek, E. E., and Ellingson, R. J.</i>	425
Functional State of Higher Segments of the Central Nervous System and Adrenopituitary Activity. <i>Trachik, V.</i>	438

The Contributions of Enzymology to Neurochemistry

It is evident as they survey the field of neurochemistry today that the enzymological approach is exercising considerable influence on the minds of those who seek a relation between mental activity and brain chemistry. It has always been the author's belief that such a relation must exist, and this belief has dominated his own investigations in the neurochemical field since he first became acquainted with mental disorder problems nearly thirty years ago. The subject of neurochemistry in relation to mental behaviour has grown rapidly since then in spite, perhaps, of a variety of psychiatric dogmas. It is now developing vigorously and fruitfully, so much so that he feels justified in claiming that in the enzymological approach to neurochemistry they have one of their finest tools for the exploration of the processes of the mind.

(Author's Abstr.)

The Effect of LSD on the Associative Processes

1. The responses of 25-LSD subject to the word association test employed by Rapaport, Gill and Schafer have been compared to those of a control group and to the responses given by groups of schizophrenic, depressive, and neurotic patients tested by Rapaport *et al.*
2. Our analysis shows that in the associative processes, at least, the LSD reaction does not closely approximate any of the principal "functional" psychiatric disorders.
3. Probably the most striking way in which the LSD reaction differs from all other conditions is the abolition of the differential response to traumatic and non-traumatic stimuli. We have attempted to place this phenomenon within the framework of modern ego-psychology theory.

(Authors' Abstr.)

JUNE

1959

General Physiology and Pharmacology of Synapses and Some Implications for the Mammalian Central Nervous System. <i>Grundfest, H.</i>	473
Neuromyositis. <i>Barron, K. D., and Fine, D. I. M.</i>	497
*The Value of Photic Stimulation in the Diagnosis of Epilepsy. <i>Melsen, S.</i>	508
*Studies on Human Saliva: A Tyramine-like Component and Its Response to Autonomic Stimulation. <i>Schenker, V., and A. C.</i>	520
*Psychological Studies of Korsakoff's Psychosis: I. General Intellectual Functions. <i>Victor, M., et al.</i>	528
Abnormal Mental Conditions in Infancy. <i>Goldstein, K.</i>	538
*An Exploratory Investigation of the Effect of Meprobamate on Stuttering Behavior. <i>Di Carlo, L. M., et al.</i>	558

The Value of Photic Stimulation in the Diagnosis of Epilepsy

1. A total of 1,366 patients with unquestionable or suspected epilepsy and non-paroxysmal routine EEGs were exposed to photic stimulation.

2. In 11·2 per cent. of the cases paroxysmal activity was excited. Positive responses were most frequent in the group of cryptogenic epilepsy (24·7 per cent.) and less common in that of symptomatic epilepsy (6·7 per cent.).

3. Photic stimulation was most effective in the younger age groups and in patients with abnormal routine EEGs.

4. In the group with cryptogenic epilepsy there was a higher proportion of paroxysmal reactions in females than in males.

5. Flicker frequencies of 12 and 14 f/s were most effective. ETM resulted in an increase in positive results, particularly in adult patients.

6. In 44 cases, responses occurred which must be regarded as non-specific.

(Author's Abstr.)

Studies on Human Saliva: a Tyramine-like Component and Its Response to Autonomic Stimulation

A tyramine-like compound has been detected as a component of human mixed saliva.

The secretion of this compound is apparently regulated by the autonomic nervous system, as seen by the changes in concentration following a single injection of autonomic drugs in human subjects.

Injection of urecholine gives rise to a definite response curve. Epinephrine also elicits changes in concentration, but not as uniformly as does urecholine.

There is no consistent correlation between changes in salivary flow volume and concentration of this salivary component.

The application of these preliminary findings to the study of autonomic function in man is discussed.

(Authors' Abstr.)

Psychological Studies of Korsakoff's Psychosis: I. General Intellectual Functions

1. The Wechsler-Bellevue Intelligence Scale and the Wechsler Memory Scale were administered to two groups of patients with the Wernicke-Korsakoff syndrome secondary to alcoholism. The first study included observations of 15 patients, who were tested shortly after the onset of their illness and then at periodic intervals ranging from three weeks to 12 months. The second study was restricted to a group of 22 patients who had all reached the relatively stable and chronic phase of the disease and who were tested at periods ranging from 12 months to over 12 years after the acute phase of the illness.

2. The test results disclose a characteristic pattern of cognitive deterioration in the Wernicke-Korsakoff syndrome. There is, however, no evidence that this pattern is specific to this syndrome. The relative degree of deterioration in different cognitive functions changes with the progress of the disease, more particularly as the initial symptoms of general confusion clear up. Presumably because of this differential progress no stable profile of intellectual functioning could be determined for the disease.

3. Memory functions clearly suffer more severely than other cognitive processes, and the most marked and persistent defect is the low capacity for learning new associations or the retention of newly-presented information such as short stories. This failure is particularly marked in tests or situations which require the reproduction of chronological sequences. The clinical disability of Wernicke-Korsakoff patients is largely accounted for by these defects.

4. The results of this study agree in general with previous reports of mental deterioration in Korsakoff's psychosis. However, attention is drawn to the defects in cognitive functions other than those directly dependent on retentive memory. The data also stress the gradually changing character of the mental abnormality, from the onset of the disease to the late stable stage.

5. Results obtained by the standard psychological tests used in these studies can only serve for a preliminary or tentative determination of the psychological profile of this disease. We have therefore regarded the conclusions presented here as a point of departure for a more intensive research geared specifically to an investigation of this cognitive damage in Korsakoff's psychosis. The results of this investigation as well as our observations on confabulation will be presented in future publications.

(Authors' Abstr.)

An Exploratory Investigation of the Effect of Meprobamate on Stuttering Behaviour

Ten stutterers given 600 mg. of meprobamate per day for the first week, 1,200 mg. per day for the second week, 1,600 mg. per day the third week, and 2,000 mg. per day the fourth week showed a reduction in the mean number of stuttered moments. This reduction, while not achieving statistical significance, did show a definite trend and was significant at the ·10 level of confidence for the group that received meprobamate. Non-parametric statistics revealed a statistically significant amount of progressive success with each trial for this group. Their own subjective evaluations confirmed the findings. On the basis of these results, further study is indicated.

(Authors' Abstr.)

VOL. 129

JULY, 1959

Some Factors Associated with Concordance and Discordance with Respect to Schizophrenia in Monozygotic Twins. <i>Rosenthal, D.</i>	1
A Methodological Study of Freudian Theory: I. Basic Concepts. <i>Kardiner, A., et al.</i>	11
Homosexual Panic: Clinical and Theoretical Considerations. <i>Glick, B. S.</i>	20
The Concept of Nemesis in Psychoneurosis. <i>Chapman, A. H.</i>	29
Ruptured Aneurysms of the Supraclinoid Portion of the Internal Carotid and of the Middle Cerebral Arteries. <i>Hirano, A., et al.</i>	35
*A New Drug Causing Symptoms of Sensory Deprivation. <i>Meyer, J. S., et al.</i>	54
*Blood and Urinary Serotonin and 5-Hydroxyindole Acetic Acid Levels in Schizophrenic Patients and Normal Subjects. <i>Feldstein, A., et al.</i>	62
Diurnal Variation Patterns of Circulating Eosinophil Counts and Salivary NA/K in Psychiatric Patients. <i>Kral, V. A., et al.</i>	69
Psychological Test Reporting: A Problem in Communication Between Psychologists and Psychiatrists. <i>Bellak, L., et al.</i>	76

A New Drug Causing Symptoms of Sensory Deprivation

Neurological, electroencephalographic and pharmacological data have been presented on over 100 individuals who have been treated with Sernyl, a drug that appears to exert a blocking action on the thalamus and midbrain. This drug eventually produces a blocking of all forms of sensation with pain sensation disappearing first. Motor movement is not impaired, except for ataxia, until the patient becomes unconscious. Blood pressure and reflexes are increased and vertical nystagmus appear in high dosage of the drug. Early and sometimes prolonged symptoms appear that are similar to those reported in sensory deprivation studies; namely, anxiety, illusional, delusional and hallucinatory phenomena with a feeling of displacement. Interference with thinking processes is an early complaint. It is concluded that Sernyl produces a "centrally medicated" sensory-deprivation syndrome.

(Authors' Abstr.)

Blood and Urinary Serotonin and 5-Hydroxyindole Acetic Acid Levels in Schizophrenic Patients and Normal Subjects

The mean concentration of blood serotonin in normal non-psychotic male subjects was found to be 0.19 $\mu\text{g./ml.}$, in chronic schizophrenic male patients 0.17 $\mu\text{g./ml.}$, and in acute psychotic male patients 0.12 $\mu\text{g./ml.}$ The mean urinary excretion rate of 5-HIAA in normal male subjects was found to be 203 $\mu\text{g./hour}$, in chronic schizophrenic male patients 225 $\mu\text{g./hour}$, and in acute psychotic male patients 332 $\mu\text{g./hour}$. The results do not indicate a metabolic defect in serotonin metabolism and therefore do not support the hypothesis of a causal relationship between serotonin metabolism and acute or chronic schizophrenia.

(Authors' Abstr.)

AUGUST

On the Motor Deficit in Congenital Bilateral Athetosis. <i>Twitchell, T. E.</i>	105
A Methodological Study of Freudian Theory: II. The Libido Theory. <i>Kardiner, A., et al.</i>	133
The Adaptive Significance of the Dream. <i>Ullman, M.</i>	144
Personality Dynamics in Torticollis. <i>Cleveland, S. E.</i>	150
The Formation and Extinction of Conditioned Reflexes in "Brain-Damaged" and Mongoloid Children. <i>Birch, H. G., and Demb, H.</i>	162
*The Influence of Chlorpromazine on Pathologic Emotions and Sexual Unrest. <i>Flach, F. F., and Regan, P. F., III</i>	171
*The Metabolism of Mescaline with a Note on Correlations Between Metabolism and Psychological Effects. <i>Mokrasch, L. C., and Stevenson, I.</i>	177
*An Evaluation of the Therapeutic Use of Trifluorpromazine in Mental Disease. <i>Roebuck, B. E., et al.</i>	184

The Influence of Chlorpromazine on Pathologic Emotions and Sexual Unrest

The effective use of drugs in psychiatric treatment requires specific knowledge of the influence of pharmacologic agents on emotions and related psychodynamic factors which may markedly influence the clinical state of any patient. When attention is paid to these features, it is possible to develop a useful scheme, which not only deepens the understanding of the nature of clinical changes induced with drugs, but also allows for the selection of the correct method of treatment for an individual patient in a particular phase of an illness.

This study reports the effects of chlorpromazine in a series of 142 patients who received the drug as an adjunct to intensive psychotherapy in a hospital setting. Good therapeutic results were obtained in patients demonstrating fear, hostility, or related paranoid features. Contrary to general opinion, chlorpromazine appeared to be singularly ineffective in many conditions where anxiety was a leading feature. The marked ability of chlorpromazine to reduce sexual unrest has received very little recognition, yet this influence may contribute substantially to its broad clinical usefulness in the treatment of psychiatric disorders.

(Authors' Abstr.)

The Metabolism of Mescaline with a Note on Correlations Between Metabolism and Psychological Effects

Eleven volunteer subjects were given mescaline intravenously in twenty experiments. For the period of intoxication blood levels and rates of urinary excretion of mescaline and trimethoxyphenylacetic acid were measured and observations made of the subjects' behavioural responses.

The behavioural responses of the subjects varied widely in severity of symptoms and in the pattern of disturbance of mental function.

An average of 31 per cent. of the drug administered was recovered in the urine within the first six hours after the administration of the drug. An additional 7.4 per cent. (average) of the administered drug was recovered as trimethoxyphenylacetic acid.

The blood levels and rates of excretion of mescaline did not fall off asymptotically, but formed a flattening curve and often one with some elevation between the third and sixth hour after administration of the drug. The blood levels and rates of excretion of trimethoxyphenylacetic acid showed such secondary peaks to an even greater extent.

The period of maximal behavioural changes followed the period of maximal blood level and excretion by one to two hours.

No correlations were observed between degree or type of behavioural responses and blood levels or rates of excretion of mescaline.

The curves of blood levels and rates of excretion of mescaline and trimethoxyphenylacetic acid and the delay in occurrence of maximal behavioural change suggest that mescaline may be converted into some other substance which is directly responsible for the effects on the central nervous system.

(Authors' Abstr.)

An Evaluation of the Therapeutic Use of Triflupromazine in Mental Disease

Examination of the results of this investigation leaves no doubt that triflupromazine is an effective and useful phrenotropic agent. This seems a particularly valid conclusion when the nature of the patient group is considered. All patients treated were classified as chronically ill and were considered to have relatively poor prognosis. Side by side comparison with chlorpromazine in this series of 124 patients showed triflupromazine at least to equal the effectiveness of the older drug. It is likely that if chlorpromazine had been administered by other than a blind technique larger doses would have been prescribed. With regard to potency, our impression is that for equal therapeutic effect, the dosage of triflupromazine should be approximately one-quarter or one-fifth that of chlorpromazine. Few patients required a dosage in excess of 100 mg. of triflupromazine daily and some were adequately maintained on 50 mg. daily. Toxic central nervous system reactions, in our experience, seldom occurred unless the daily dosage exceeded 200 mg.

The battery of psychological tests employed in this investigation confirmed the clinical finding that triflupromazine produced significant improvement in this series of hospitalized patients. The techniques adopted were such as to preclude the possibility that the changes observed were the result of chance. The inclusion of a placebo group provided an objective estimate of changes due both to the increased attention received by patients involved in this study and to the psychological effects of the ritual of taking medicine.

(Authors' Abstr.)

VOL. 22	J. NEUR. NEUROSURG. PSYCHIAT.	AUGUST, 1959
Memories of Hugh Cairns. <i>Jefferson, Sir G.</i>	155
Changes in Human Muscles after Permanent Tenotomy. <i>Sunderland, S., and Lavarack, J. O.</i>	167
The Range of Conduction Velocity in Normal Motor Nerve Fibres to the Small Muscles of the Hand and Foot. <i>Thomas, P. K., et al.</i>	175
A Clinical and Experimental Study of the Effects of Exercise on Motor Weakness in Neurological Disease. <i>Lenman, J. A. R.</i>	182
A Case of Spontaneous Dissecting Aneurysm of the Internal Carotid Artery. <i>Anderson, R. McD., and Schechter, M. M.</i>	195
Ruptured Posterior Fossa Aneurysms and Their Surgical Treatment. <i>Dimsdale, H., and Logue, V.</i>	202
The Association of Cerebral Angiomas with Intracranial Aneurysms. <i>Boyd-Wilson, J. S.</i>	218
Congenital Arteriovenous Fistula with Aneurysm of the Great Cerebral Vein and Hydrocephalus Treated Surgically. <i>Gibson, J. B., et al.</i>	224
Traumatic Thrombosis of the Internal Carotid Artery. <i>Hockaday, T. D. R.</i>	229
Clinical and Electroencephalographic Investigations in Myoclonic Cerebellar Dys-synergia. <i>Kreindler, A., et al.</i>	232
Is Lumbar Puncture Harmful in Multiple Sclerosis? <i>Schapira, K.</i>	238
*Slowness in Schizophrenia. <i>Harris, H., and Metcalfe, M.</i>	239
*The Use of an Object Sorting Test in Elucidating the Hereditary Factor in Schizophrenia. <i>McConaghy, N.</i>	243
*A Clinical and Biochemical Study of a Trial of Iproniazid in the Treatment of Depression. <i>Pare, C. M. B., and Sandler, M.</i>	247
A Cerebrospinal Fluid Bank. <i>Voris, H. C., and Talso, P. J.</i>	252

Slowness in Schizophrenia

The influence of various factors on the mental speed of a group of schizophrenic patients was investigated by means of the Nufferno speed test. Longer duration of illness was associated with slower performance on the unstressed portion of the test, this being more definite in the case of those patients who also showed inappropriate affect. Patients who had had physical treatment tended to be slower on the unstressed portion of the test and those whose illness had a favourable outcome tended to be faster than the others. A significant relationship appeared between low stress-gain score and favourable social outcome. No satisfactory formula for predicting outcome on the basis of this test could be devised. An effort to correlate speed with disease and recovery failed because of the difficulty of finding patients who had gone through their illness without receiving physical treatment, since this latter formed a complicating factor which could not be allowed for.

(Authors' Abstr.)

The Use of an Object Sorting Test in Elucidating the Hereditary Factor in Schizophrenia

A significant number of parents of schizophrenics with "thought disorder" were found to obtain scores on the sorting test of Rapaport (1945) different from those of control normals but similar to those found in schizophrenic patients.

It is suggested that this test may provide an objective means of estimating the presence of "schizoid" features in the relatives of schizophrenics, and thus aid in the elucidation of the hereditary factors in schizophrenia.

(Author's Abstr.)

A Clinical and Biochemical Study of a Trial of Iproniazid in the Treatment of Depression

A controlled trial of iproniazid on 50 patients with depression showed that 26 of them improved and that the improvement in at least 12 of these was due to the drug. The danger of liver damage was stressed.

An attempt was made to differentiate these groups and to determine the mode of action of iproniazid in those patients who responded. Methods used included parenteral administration of 5-hydroxytryptophan and 3,4-dihydroxyphenylalanine and assessment of urinary 5-hydroxyindole excretion.

(Authors' Abstr.)

VOL. 4

J. NEUROCHEM.

AUGUST, 1959

The Quantitative Histochemical Distribution of Thiamine in Normal Rat Brain. <i>Dreyfus, P. M.</i>	183
Study of Esterase Activity in Human Brain and Serum. <i>Bernsohn, J., et al.</i>	191
Electrophoretic Protein Fractions and the Hydrophilic Property of Brain Tissue—I. The Proteins of Normal Brain. <i>Kiyota, K.</i>	202
Electrophoretic Protein Fractions and the Hydrophilic Property of Brain Tissue—II. The Proteins of Brains with Edema. <i>Kiyota, K.</i>	209
Effect of Convulsant Treatment on the 5-Hydroxytryptamine Content of Brain and Other Tissues of the Rat. <i>Bertaccini, G.</i>	217
Microdetermination of Free and Esterified Cholesterol in Cerebrospinal Fluid. <i>Papadopoulos, N., et al.</i>	223
Effects of Flavins on the Electroencephalogram. <i>Muramatsu, T., et al.</i>	229
Ganglioside and Its Relationship to Neuraminic Acid and Hexosamine in the Brain. <i>Cummings, J. N., et al.</i>	234
Effect of Hydrogen-Ion Concentration on the Carbohydrate Metabolism of Brain Tissue. <i>Domonkos, J., and Huszák, I.</i>	238
Species Differences in the Distribution of Extraneuronal Cholinesterases Within the Vertebrate Central Nervous System. <i>Brightman, M. W., and Albers, R. W.</i>	244
The Effect of Reserpine on the Intracellular Distribution of Catecholamines in the Brain Stem of the Rabbit. <i>Weil-Malherbe, H., and Bone, A. D.</i>	251
Effect of Denervation on Histochemically Demonstrable Acetylcholinesterase and Non- Specific Cholinesterase in the Rat Adrenal. <i>Eränkő, O., et al.</i>	264

VOL. 18

J. NEUROPATH. EX. NEUR.

JULY, 1959

Dysmyelinogenic Leukodystrophy. Report of a Case of a New, Presumably Familial Type of Leukodystrophy with Megalobarencephaly. <i>Wohlwill, F. J., et al.</i>	359
Schilder's Disease with Melanoderma. <i>Lichtenstein, B. W., and Rosenbluth, P. R.</i>	384
Allergic Encephalomyelitis in Rats and Rabbits Pretreated with Nervous Tissue. <i>Waksman, B. H.</i>	397
The Cerebral Distribution and Migration of Radioisotopes with Special Reference to Autoradiograms. <i>Yamamoto, T.</i>	418
Foramina, Fenestrae, and Thinness of Parietal Bone. <i>Nashold, B. S., Jr., and Netsky, M. G.</i>	432
Clinico-Pathologic Correlations in Experimental "Allergic" Encephalomyelitis. I. Observations on the Early Lesion. <i>Alvord, E. C., Jr., et al.</i>	442

- Clinico-Pathologic Correlations in Experimental Allergic Encephalomyelitis. II. Development of an Index for Quantitative Assay of Encephalitogenic Activity of "Antigens". *Alvord, E. C., Jr., and Kies, M. W.* .. 447
- Studies on Rat Neuroglia Cells in Tissue Culture. *Berg, O., and Kallen, B.* .. 458
- Exencephalia Following X-Irradiation of the Pre-Implantation Mammalian Embryo. *Rugh, R., and Grupp, E.* .. 468
- An *In Vitro* Study of Muscle in Myotonia. *Corsi, A., and Gentili, C.* .. 482

VOL. 22 J. NEUROPHYSIOL. JULY, 1959

- Activity of Auditory Neurons in Upper Levels of Brain of Cat. *Katsuki, Y., et al.* .. 343
- Supraspinal Origin of a Post-Stimulating Long-Lasting Inhibition of Galvanic Skin Reflex. *Wang, G. H., and Hind, J. E.* .. 360
- Differential Effect of Medial and Lateral Dorsal Root Sections Upon Subcortical Evoked Potentials. *Spivy, D. F., and Metcalf, J. S.* .. 367
- Effect of Bilateral Temporal Cortical Ablation on Discrimination of Sound Direction. *Riss, W.* .. 374
- Some Properties of Pyramidal Neurones in Motor Cortex with Particular Reference to Sensory Stimulation. *Li, C.-L.* .. 385
- Active Phase of Frog's End-Plate Potential. *Takeuchi, A., and N.* .. 395
- Modification of Sensory Mechanisms by Subcortical Structures. *Long, R. G.* .. 412
- "Generalization" Between Cortically and Peripherally Applied Stimuli Eliciting Conditioned Reflexes. *Doty, R. W., and Rutledge, L. T.* .. 428
- Cortical Intracellular Potentials and Their Responses to Strychnine. *Li, C.-L.* .. 436
- Cerebellar Projections to Limbic System. *Anand, B. K., et al.* .. 451
- Prolonged Stimulation of Brain in Awake Monkeys. *Delgado, J. M. R.* .. 458

SEPTEMBER 1959

- Antidromic and Synaptic Activation of Frog Motor Neurons. *Machne, X., et al.* .. 483
- Organization of Callosal Connections in Supra-Sylvian Gyrus of Cat. *Grafstein, B.* .. 504
- Medullary Responses to Stimulation of Orbital Cortex. *Newman, P. P., and Wolstencroft, J. H.* .. 516
- Behavior Changes Following Caudate Lesions in Rhesus Monkey. *Dean, W. H., and Davis, G. D.* .. 524
- Propagation of After-Discharge Between Temporal Lobes. *Poblete, R., et al.* .. 538
- Potential Changes in Syncytial Neurons of Lobster Cardiac Ganglion. *Hagiwara, S., et al.* .. 554
- Cerebral Response of Anterior Sigmoid Gyrus to Ipsilateral Posterior Sigmoid Stimulation in Cat. *Nakahama, H.* .. 573
- Single Unit Activity in Medullary Respiratory Centers of Cat. *Nelson, J. R.* .. 590

VOL. 16 J. NEUROSURG. JULY, 1959

- Surgery of Cerebral Hemorrhage. Report on the Results of 52 Surgically Treated Cases. *Lazorthes, G.* .. 355
- Congenital Nasofrontal Encephalomeningoceles and Teratomas. Review of Seven Cases. *Davis, C. H., Jr., and Alexander, E., Jr.* .. 365
- Papilloedema and Hypoparathyroidism Simulating Brain Tumor. *Palmer, R. F., et al.* .. 378
- Subependymal Glomerate Astrocytoma. Report of Two Cases. *Godwin, J. T.* .. 385
- Contrast-Medium Injury to the Spinal Cord. The Role of Altered Circulatory Dynamics. *Margolis, G., et al.* .. 390
- Therapeutic Hypothermia in Cases of Head Injury. *Sedzimir, C. B.* .. 407
- Regeneration of Dural Defects. A Review. *Keener, E. B.* .. 415
- An Experimental Study of Reactions of the Dura Mater to Wounding and Loss of Substance. *Keener, E. B.* .. 424
- Glossopharyngeal Neuralgia and Ossification of the Stylohyoid Ligament. *Graf, C. J.* .. 448
- Hypaque in Cerebral Angiography. Report of Complications in 617 Angiograms. *Brendler, S. J., and Hayes, G. J.* .. 454

SEPTEMBER

- Delayed Action Potentials in the Trigeminal System of Cats. Discussion of Their Possible Relationship to Tic Douloureux. *Crue, B. L., Jr., and Sutin, J.* .. 477
- Cerebellar Hematomas. *Arseni, C., and Oprescu, I.* .. 503
- Spinal Epidural Hematomas. Experiences with Three Patients. *Lowrey, J. J.* .. 508
- Immediate and Late Results of Surgery in Cases of Saccular Intracranial Aneurysms. *Hamilton, J. G., and Falconer, M. A.* .. 514
- Fracture of the Cervical Spine in Patients with Rheumatoid Arthritis. *Lemmen, L. J., and Laing, P. G.* .. 542
- Ventriculo-Auriculostomy in Treatment of Hydrocephalus. *Anderson, F. M.* .. 551
- Multiple Intracranial Aneurysms. Aspects of Treatment. *Hamby, W. B.* .. 558
- Intracranial Epidermoid and Dermoid Tumors. *Keville, F. J., and Wise, B. L.* .. 564

- A Comparison of Attitude Scores on Some Socio-Cultural and Educational Issues Between Two Samples of College Students After an Interval of Four Years: (India). *Rath, R.* 57
- Moral Codes of American and Korean College Students. *Rettig, S., and Pasamanick, B.* 65
- Need Patterns in Two Generations of Japanese Americans in Hawaii. *Arkoff, A.* 75
- Preference for Delayed Reinforcement: An Experimental Study Among Palestinian Arab Refugee Children. *Melikian, L.* 81
- Self Images of Personal Adjustment vs. the Estimates of Friends. *Winthrop, H.* 87
- Business Communication: A Survey of the Literature. *Sexton, R., and Staudt, V.* 101
- Stimulus, Response, and Social Role. *Lewis, D. J.* 119
- The Effects of "Emotional" Language on the Induction and Change of Opinions. *Weiss, W., and Lieberman, B.* 129
- The Effect of Inter-Racial Contact on Sociometric Choices and Perceptions. *Mann, J. H.* 143
- Relationship of Degree of Self-Esteem to Gossiping Behavior. *Radlow, R., and Berger, P.* 153

VOL. 24

J. SPEECH HEAR. DIS.

AUGUST, 1959

- Significance of Neurophysiological Orientation to Cerebral Palsy Habilitation. *Mysak, E. D.* 221
- Speech and Language Development of Athetoid and Spastic Children. *Byrne, M. C.* 231
- Communication Skills and Intelligence in Right and Left Hemiplegics. *Boone, D. R.* 241
- Abbreviated Sweep-Check Procedures for School Hearing Testing. *Siegenthaler, B. M., and Sommers, R. K.* 249
- Screening Tests of Hearing. *Stevens, D. A., and Davidson, G. D.* 258
- Counseling Parents of Stuttering Children. *Sander, E. K.* 262
- Double-Syllable Words. *Blumel, C. S.* 272
- Creative Dramatics in Speech Correction. *McIntyre, B. M., and McWilliams, B. J.* 275
- Cybernetics in the Treatment of Voice Disorders. *Shearer, W. M.* 280
- Group Interview: Initial Parental Clinic Contact. *Wilson, D. K., et al.* 282
- Selected Bibliography on Voice Disorders. *Landes, B. A.* 285

VOL. 9

NEUROL.

JULY, 1959

- Cerebrovascular Disease: III. The Intracerebral Arterioles. *Baker, A. B., and Iannone, A.* 441
- Intracranial Hemorrhage as a Complication of Anticoagulant Therapy. *Barron, K. D., and Fergusson, G.* 447
- *Tryptophan Metabolism in Porphyria, Schizophrenia, and a Variety of Neurologic and Psychiatric Diseases. *Price, J. M., et al.* 456
- *The Effects of Lysergic Acid After Cerebral Ablation. *Baldwin, M., et al.* 469
- Progressive Muscular Weakness and Pain as Symptoms of Adult Fanconi Syndrome. *Worthington, J. W., Jr., and Mulder, D. W.* 475
- Early Surgical Treatment of Aneurysms of the Circle of Willis. *Pool, J. L., et al.* 478
- Migraine Plus Epilepsy. *Alvarez, W. C.* 487
- *Effect of Drugs on Discharge Characteristics of Chronic Epileptogenic Lesions. *Morrell, F., et al.* 492

Tryptophan Metabolism in Porphyria, Schizophrenia, and a Variety of Neurologic and Psychiatric Diseases

The urinary excretion of 9 metabolites of the essential amino acid L-tryptophan has been determined in 18 patients with acute, chronic, or mixed hepatic porphyria, 19 patients with schizophrenia, 8 patients with a variety of psychoses, and 10 patients with a variety of neurologic diseases. Of 18 patients with porphyria, 13 showed evidence of abnormal tryptophan metabolism characterized by increased urinary excretion of kynurenine, acetylkynurenine, kynurenic acid, hydroxykynurenine, and occasionally, xanthurenic acid or other metabolites. A similar metabolic response was found in 6 of the patients with a variety of types of psychoses. Each of the patients with neurologic conditions metabolized tryptophan in an essentially normal manner.

Although the type of abnormality of the tryptophan metabolism of these patients suggests a functional pyridoxine deficiency, neither biochemical nor clinical improvement resulted following pyridoxine supplementation. Both clinical and biochemical improvement were often observed following treatment with chelating agents.

The possibility that the clinical and biochemical manifestations of porphyria might be related to a disturbance in polyvalent cation balance was discussed.

(Authors' Abstr.)

The Effects of Lysergic Acid After Cerebral Ablation

The observations reported above are typical of 70 experiments conducted over a two-year period. In these tests, all animals were used in various combinations. According to these observations, the young chimpanzee reacts to lysergic acid with a panorama of abnormal behaviour which is consistent and characteristic. If such an animal is subjected to bifrontal lobectomy, his reactions in ordinary situations are radically changed; yet his reactions to the drug are not. Paradoxically, he reacts to lysergic acid in the same way as before operation,

although this massive ablation has obviously affected all other reactions in social, test, and training situations. Indeed, among his various post-operative responses, only the drug reaction remains comparable to those observed before bifrontal lobectomy. Apparently, intact frontal lobes are not essential for the characteristic drug reaction.

On the other hand, if such an animal is subjected to bilateral temporal lobectomy, his responses to ordinary situations are remarkably unchanged, except for a four-week period after surgery. Yet, his response to the drug is obviously changed. Some autonomic reactions remain thereafter, but panic or perceptual aberration does not increase in the post-operative drug reaction. However, unilateral temporal lobectomy does not change the animal's reaction to lysergic acid. Nor does lobectomy alter social or training responses. Apparently, one or the other temporal lobe is essential for this drug reaction in young chimpanzees.

When the temporal ablation includes only the mesial structures, the reaction to lysergic acid is unchanged. Yet, after selective ablation of both lateral temporal cortices, the reaction changes or disappears. Perhaps the lateral temporal cortex and its tapetal connections form essential links in the neurologic chain which constitutes the background of this panoramic reaction.

The reaction itself is a compound of perceptual aberration and panic. As the animal reacts, he may look at his hand and scream. Then his pupils dilate, and his hair stands on end. Or he will react abnormally to the usual forms, colours, and sounds of his habitual surroundings.

According to recent reports, the lateral temporal cortex is concerned with perception. The human reaction and the reaction of the chimpanzee to administration of lysergic acid are certainly characterized by gross perceptual aberration in the chimpanzee. Perhaps the drug disturbs perceptual mechanisms represented in the grey mantle of the temporal lobe.

(Authors' Abstr.)

Effect of Drugs on Discharge Characteristics of Chronic Epileptogenic Lesions

Chronic epileptogenic lesions were produced in the visual cortex of rabbits. The effect of anticonvulsant agents was measured against the discharge frequency of the spike focus, the threshold to photic activation, and the characteristic patterns of spread. A standard Metrazol challenge was used as a means of comparing our results with those obtained in the more usual pharmacologic assays. Dilantin did not produce suppression of the primary focus nor did it appear to limit spread to the basal diencephalon or to protect against Metrazol challenge. However, transcortical propagation was effectively limited.

Spirodone demonstrated effective suppression of the primary focus as well as limitation of spread both to basal nuclei and transcortically. Some protection also existed against Metrazol challenge. Tridione also appeared to suppress the primary focus as well as to limit spread to the basal diencephalon. However, transcortical spread was not effectively limited until the primary focus itself was suppressed. Metrazol protection was the highest of any of the drugs tested. Phenobarbital produced only slight suppression of the primary focus and transcortical spread, good limitation of spread to the basal diencephalon, and good Metrazol protection.

(Authors' Abstr.)

AUGUST

Presidential Address. <i>Forster, F. M.</i>	509
Intracranial Chordoma. Case Report. <i>Demir, R., and Steegmann, A. T.</i>	514
Failure of Amyotrophic Lateral Sclerosis to Respond to Intrathecal Steroid and Vitamin B ₁₂ Therapy. <i>Pieper, S. J. L., and Fields, W. S.</i>	522
Glossopharyngeal Neuralgia Associated with Cardiac Arrest and Hypersecretion from the Ipsilateral Parotid Gland. <i>Kjellin, K., et al.</i>	527
Infectious Neuritis (Guillain-Barré Syndrome) in Children. <i>Peterman, A. F., et al.</i>	533
Glutamic Oxalacetic Transaminase (GOT) and Lactic Dehydrogenase (LDH) Activities. <i>Green, J. B., et al.</i>	540
Evaluation of Phosphohexose Isomerase Activity in Cerebrospinal Fluid in Neoplastic Disease of the Central Nervous System. <i>Thompson, H. G., Jr., et al.</i>	545
Blood Viscosity in Cerebrovascular Disease. <i>Swank, R. L.</i>	553
Fate of Red Blood Cells Injected into Cerebrospinal Fluid Pathways. <i>Adams, J. E., and Prawirohardjo, S.</i>	561
On the Existence of the Cerebral Type Carotid Sinus Syncope. <i>Engel, G. L.</i>	565

SEPTEMBER

Development of Cerebral Atherosclerosis in Various Age Groups. <i>Moossy, J.</i>	569
Clinical and Electroencephalographic Considerations in the Diagnosis of Carotid Artery Occlusion. <i>Hass, W. K., and Goldensohn, E. S.</i>	575
Aneurysms of the Vertebral Artery. <i>Paulson, G., et al.</i>	590
Noninfectious Granulomatous Angiitis with a Predisposition for the Nervous System. <i>Cravioto, H., and Feigin, I.</i>	599
Electroencephalograms During Coma. <i>Loeb, C., et al.</i>	610
Effect of Air Embolism on Permeability of Cerebral Blood Vessels. <i>Lee, J. C., and Olzewski, J.</i>	619

VOL. 33	PSYCHIAT. QUART.	JANUARY, 1959
The Psychiatrist and the Patient's Relatives. <i>Beutner, K. R., and Branch, R.</i>		1
*The Psychiatric Application of Vesprin. <i>Ilem, P. G., and Sainz, A.</i>		9
The Diagnosis of Pseudoneurotic Schizophrenia. <i>Hoch, P. H., and Cattell, J. P.</i>		17
Treatment by Hemispherectomy of Nine Cases of Spastic Hemiplegia, Severe Mental Retardation and Intractable Epilepsy. <i>Morello, A., et al.</i>		44
Massive Chlorpromazine Therapy: The Nature of Behavioral Changes. <i>Mendelsohn, R. M., et al.</i>		55
The Classification of "Mental Illness". <i>Szasz, T. S.</i>		77
The Treatment of Schizophrenic Out-Patients with Promazine and Reserpine. <i>Engelhardt, D. M., et al.</i>		102
Advantages of the Concept of a Continuum of Schizophrenic Reactions. <i>Lichtenberg, J. D.</i>		115
The Ecological Distribution of Patients Admitted to Mental Hospitals from an Urban Area. <i>Hardt, R. H.</i>		126

The Psychiatric Application of Vesprin

Vesprin is an effective phrenopraxic drug of the broad spectrum type comparable to chlorpromazine in its general applications. It is more effective and less toxic than chlorpromazine and should be considered the first choice for the treatment of schizophrenic conditions and the obsessive-compulsive neurosis. It is of value in the treatment of senile psychosis and valueless in the treatment of depressions and of manic psychosis—except, in the latter case, as an antikinetic. The drug is almost free from severe side-effects and complications. It interferes less than chlorpromazine with the blood-pressure-regulating mechanisms of the body, but produces a substantial amount of extrapyramidal reactions. Of these last, akathisia is the most bothersome, and this limits the usefulness of the medication in ambulatory neurotics.

(Authors' Abstr.)

APRIL

Pseudologia Fantastica. <i>Hoyer, T. V.</i>	203
Psychiatry in Great Britain Today: I. <i>Beresford, C.</i>	221
Comparison of Low and High Dosage Procedures in Chlorpromazine Therapy. <i>Schiele, B. C., et al.</i>	252
Value of Group Psychotherapy in Patients with "Polysurgery Addiction". <i>Brody, S.</i>	260
Eating Patterns and Obesity. <i>Stunkard, A. J.</i>	284
A Direct Analytic Contribution to the Understanding of Post-partum Psychosis. <i>Rosberg, J., and Karon, B. P.</i>	296
Anti-Depressant Effect of Certain Phenothiazine Combinations. <i>Sainz, A.</i>	305
Notes on the Use of Recorded Minutes in Group Therapy with Chronic Psychotic Patients. <i>Golner, J. H., et al.</i>	312
The Importance of Nonmotivational Behavior Patterns in Psychiatric Diagnosis and Treatment. <i>Chess, S., and Thomas, A.</i>	326
The Office Management of the Neurotic Patient. <i>Malamud, W.</i>	335
Depression. <i>Cowen, J. R.</i>	351

VOL. 22	PSYCHIAT.	AUGUST, 1959
Human Relatedness and the Schizophrenic Reaction. <i>Will, O. A., Jr.</i>		205
The Vocabulary of Emotion. <i>Geertz, H.</i>		225
The Pursuit of Anxiety-Laden Areas in Therapy of the Schizoid Patient. <i>Bonime, W.</i>		239
A Marriage Pattern: The "Lovesick" Wife and the "Cold, Sick" Husband. <i>Martin, P. A., and Bird, H. W.</i>		245
Further Consideration of the "Cold, Sick" Husband. <i>Bird, H. W., and Martin, P. A.</i>		250
Primitive Psychotherapy. <i>Lederer, W.</i>		255
The Integration of Group Therapy with Individual Psychoanalysis. <i>Schechter, D. E.</i>		267
A Concept of Ego-Oriented Psychotherapy. <i>Sarvis, M. A., et al.</i>		277
A Study of a "Transactional" Psychotherapy. <i>Shands, H. C., et al.</i>		289
Intensive Psychotherapy and Personality Change. <i>Baughman, E. E., et al.</i>		296

VOL. 28	PSYCHO-ANAL. QUART.	APRIL, 1959
Schreber: Father and Son. <i>Niederland, W. G.</i>		151
Influences Determining Types of Regression. <i>Romm, M. E.</i>		170
Discussion of a Dream Pair Reported by a Patient with Early Essential Hypertension. <i>Wilson, G. W.</i>		183
An Unusual Fantasy in a Twin with an Inquiry into the Nature of Fantasy. <i>Joseph, E. D.</i>		189
The Feeling of a Deficit in Learning: A Contribution to Ego Psychology. <i>Seidenberg, R.</i>		207
Oedipus and the Prodigal Son. <i>Parcells, F. H., and Segel, N. P.</i>		213
Repetition-Functions of Transitory Regressive Thinking. <i>Holzman, P. S., and Ekstein, R.</i>		228

"West" as a Symbol of Death. <i>Altman, L. L.</i>	236
Observations on the Visual Symptomatology in Migraine. <i>Garma, A.</i>	242
A Hitherto Unremarked Error of Freud's. <i>Barrett, W. G.</i>	247

JULY

Some Observations on the Sense of Smell. <i>Friedman, P.</i>	307
On Gadgets. <i>Giovacchini, P. L.</i>	330
Generative Empathy in the Treatment Situation. <i>Schafer, R.</i>	342
The Selection of Candidates applying for Psychoanalytic Training. <i>Eisendorfer, A.</i> ..	374
A Note on two characteristics of Transference. <i>Lehrman, S. R.</i>	379
Flatulent Phallus. <i>Saul, L. J.</i>	382
Reactions of a Man to Natural Death. <i>Saul, L. J.</i>	383

VOL. 1 PSYCHOPHARMACOL. 1959

Behavioral Pharmacology. <i>Sidman, M.</i>	1
*Relationships of Psychotomimetic to Anti-Serotonin Potencies of Congeners of Lysergic Acid Diethylamide (LSD-25). <i>Isbell, H., et al.</i>	20
*Comparison of the Reactions Induced by Psilocybin and LSD-25 in Man. <i>Isbell, H.</i>	29
The Influence of Side-Effects on the Reporting of Symptoms. <i>Letemendia, F. J. J., and Harris, A. D.</i>	39
A Psychometric Study of the Effects of Amytal and of Chlorpromazine on Normal Subjects. <i>Delay, J., et al.</i>	48
Effects of Chlorpromazine on Acquisition and Extinction of a Conditioned Response in Mice. <i>Denenberg, V. H., et al.</i>	59
*Lithium in Psychiatric Therapy. Stock-taking After Ten Years. <i>Schou, M.</i>	65

Relationships of Psychotomimetic to Anti-Serotonin Potencies of Congeners of Lysergic Acid Diethylamide

1. The psychotomimetic potency of 13 congeners of LSD-25 has been approximately determined in man.
2. With the exception of acetylation of the indole nitrogen, all the changes made in the LSD molecule reduced psychotomimetic potency. Bromination at carbon 2 caused the greatest inactivation.
3. High potency as a serotonin antagonist in isolated smooth muscle preparations was not correlated with high potency as a psychotomimetic.
4. The data do not support but do not disprove the "serotonin deficiency" hypothesis of the LSD psychosis.

(Authors' Abstr.)

Comparison of the Reactions Induced by Psilocybin and LSD-25 in Man

1. The reaction induced by oral administration of 57 to 114 mcgm./kg. of O-Phosphoryl-4-hydroxy-N-dimethyltryptamine (psilocybin) has been compared with that induced by a placebo and LSD-25 (1.0 to 1.5 mcgm./kg.) in 9 subjects.
2. Both LSD and psilocybin caused elevations in body temperature, pulse and respiratory rates, and systolic blood pressure. Threshold for elicitation of the knee-jerk was decreased by both drugs.
3. After both drugs, abnormal mental states characterized by feelings of strangeness, difficulty in thinking, anxiety, altered sensory perception (particularly visual), elementary and true visual hallucinations, and alterations of body image were reported by the subjects.
4. The effects of psilocybin did not persist as long as those of LSD.
5. LSD is 100 to 150 times as potent as psilocybin.

(Author's Abstr.)

Lithium in Psychiatric Therapy. Stock-taking After Ten Years

Lithium therapy is effective against manic phases of the manic-depressive psychosis; in protracted or frequently recurring mania it seems to offer advantages over other available therapies. Lithium salts are administered orally; they may be given alone or as a maintenance treatment after electric convulsive therapy.

Lithium is potentially toxic, and overdosage may lead to injury of the kidney tubules. A high sodium intake accelerates renal elimination of lithium and serves to protect the organism against intoxication.

Patients suffering from renal or cardiac disease should not be given lithium. In patients receiving lithium the dosage must be regulated according to individual tolerance, and one must make sure that the sodium intake is sufficient and remains sufficient. The patients should be supervised clinically and biochemically.

(Author's Abstr.)

VOL. 21	PSYCHOSOM. MED.	JULY-AUGUST, 1959
	On Timesmanship: I. Techniques for Outwitting the Chairman. <i>Engel, G. L.</i> ..	263
	Psychophysiological Studies of the Neonate: An Approach Toward the Methodological and Theoretical Problems Involved. <i>Bridger, W. H., and Reiser, M. F.</i> ..	265
	An Experimental Investigation of Sexual Symbolism in Anorexia Nervosa Employing a Subliminal Stimulation Technique: Preliminary Report. <i>Beech, H. R.</i> ..	277
	*Obesity and the Denial of Hunger. <i>Stunkard, A.</i> ..	281
	Discussion of Dr. Stunkard's Paper, "Obesity and the Denial of Hunger". <i>Hamburger, W. W.</i> ..	290
	Psychological Variables and Human Cancer: A Cross-Validation Study. <i>Krasnoff, A.</i> ..	291
	Life Situations Associated with the Onset of Pregnancy: I. The Role of Separation in a Group of Unmarried Pregnant Women. <i>Greenberg, N. H., et al.</i> ..	296
	On Critics and Research. <i>Osmond, H., and Hoffer, A.</i> ..	311
	On Criticism of Critics. <i>Benjamin, J. D.</i> ..	321

Obesity and the Denial of Hunger

The relationship of gastric motility to the experience of hunger has been investigated. In accord with traditional views a group of non-obese women usually reported hunger during contractions of the empty stomach, and no hunger in the absence of such contractions. A group of obese women, on the other hand, usually failed to report hunger during the presence of stomach contractions. This denial of hunger extended to a denial of sensations of epigastric emptiness and of the desire to eat—fundamental characteristics of the hunger experience among non-obese women. That the denial of hunger was due to a specific difficulty in discrimination in the presence of gastric motility is suggested by the observation that there was no difference between obese and non-obese women in the distribution of hunger reports in the absence of gastric motility.

Obese subjects manifesting the "night-eating syndrome" showed a significantly higher incidence of denials of hunger than did obese persons not manifesting this syndrome.

The suggestion is made that denial of hunger occurs in persons with a conflict over eating who are simultaneously subjected to strong social pressures in this regard. Its function, according to this hypothesis, would be to exclude from awareness any stimuli that signal an approaching caloric deficit with its concomitant conflict over eating.

(Author's Abstr.)

VOL. 20	QUART. J. STUD. ALC.	SEPTEMBER, 1959
	The Research Conference on Problems of Alcohol and Alcoholism, Washington, D.C., 25-26 October, 1958. A Summary. <i>Hoff, E. C.</i> ..	415
	Alcohols and Activity of Cerebral Neurons. <i>Grenell, R. G.</i> ..	421
	Effects of Aliphatic Alcohols on the Metabolism of Brain and Liver. <i>Quastel, J. H.</i> ..	428
	The Conversion of Labeled Ethanol to Glycerol and Glycogen. <i>Schiller, D., et al.</i> ..	432
	Some Biochemical Aspects of the Alcohol Problem. <i>Westerfeld, W. W., and Schulman, M. P.</i> ..	439
	Biochemical Individuality and Cellular Nutrition: Prime Factors in Alcoholism. <i>Williams, R. J.</i> ..	452
	Alcohol and Other Drugs as Preventives of Experimental Trauma. <i>Masserman, J. H.</i> ..	464
	A Psychological Study of the Wernicke-Korsakoff Syndrome. Results of Wechsler-Bellevue Intelligence Scale and Wechsler Memory Scale Testing at Different Stages in the Disease. <i>Victor, M., et al.</i> ..	467
	The Acute Effects of Ethyl Alcohol and Chlorpromazine on Certain Physiological Functions in Alcoholics. <i>Kissin, B., et al.</i> ..	480
	Dependence in Alcoholics. <i>Witkin, H. A., et al.</i> ..	493
	Clinical and Objective Studies of Personality Variables in Alcoholism. I. Clinical Investigation of the "Alcoholic Personality". <i>Machover, S., and Puzzo, F. S.</i> ..	505
	Clinical and Objective Studies of Personality Variables in Alcoholism. II. Clinical Study of Personality Correlates of Remission from Active Alcoholism. <i>Machover, S., and Puzzo, F. S.</i> ..	520
	Clinical and Objective Studies of Personality Variables in Alcoholism. III. An Objective Study of Homosexuality in Alcoholism. <i>Machover, S., et al.</i> ..	528
	Psychiatric Findings in an Interdisciplinary Study of Forty-Six Alcoholic Patients. <i>Zwerling, I.</i> ..	543
	Clinical Observations on a Group of Alcoholic Prisoners. With Special Reference to Women. <i>Myerson, D. J.</i> ..	555
	Evaluation of Drugs in the Treatment of Alcoholism. <i>Ditman, K. S., and Cohen, S.</i> ..	573
	Use of <i>d</i> -Lysergic Acid Diethylamide in the Treatment of Alcoholism. <i>Chwelos, N., et al.</i> ..	577
	Therapeutic Community and Teamwork. <i>Forisz, L.</i> ..	591
	Mortality Among Treated Alcoholics. A Three-Year Follow-Up Study. <i>Lipscomb, W. R.</i> ..	596
	The Characteristics of Alcoholics as Related to Prediction of Therapeutic Outcome. <i>Mindlin, D. F.</i> ..	604
	Interval Between Intake and Follow-Up as a Factor in the Evaluation of Patients with a Drinking Problem. <i>Gerard, D. L., and Saenger, G.</i> ..	620

Alcoholics, Drinking and Traffic Accidents. <i>Schmidt, W. S., and Smart, R. G.</i> ..	631
Measuring Knowledge of Alcoholism in the Community. <i>McCarthy, R. G., and Fain, T. G.</i> ..	645
Teen-Age Drinking as Group Behavior. Implications for Research. <i>Sower, C.</i> ..	655
The Comprehensive Approach to the Problems of Alcoholism. <i>Straus, R.</i> ..	669