PSYCHOPATHIC PERSONALITY AND CRIME.

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DISCUSSION.

PSYCHIATRIC research has elucidated many unrecognized facts, and added much to our knowledge of the causes of criminal behaviour in mentally abnormal persons. At the same time the fluidity of modern psychiatry, itself evidence of progress, makes it difficult always to present simply and clearly modern views in a court of law.

This is particularly the case in matters concerning the non-sane, non-insane aberrant individuals known as psychopathic personalities in many classifications, as constitutional psychopathic inferiors by some writers, as neurotic characters by Zilboorg, as abnormal personalities by Healy, and whose abnormalities are referred to by the Army authorities of the United States of America as constitutional psychopathic states, and by Henderson as psychopathic states. It is my purpose to consider their association with criminal behaviour.

The criminal law requires facts to be ascertained, and their relation to the offender as well as to society to be understood. When individual or group behaviour assails social order and security it becomes necessary to interpret it in terms of motive and intent. In modern terminology we endeavour to determine its motivation.

In this matter confusion is likely to result if the statements of accused persons are accepted without criticism or question; if attested facts, which clearly show the motive and intent of the accused at the time the offence was committed, are disregarded; if excuses for criminal behaviour are unnecessarily based upon assumptions of unconscious motivation; and if the offender's ability to deal with his instinctive urges in a lawful manner is distorted by unwarranted suppositions.

Although it is true that a careful medical investigation into the mental condition of an offender is required when the motivation of a crime is obscure, it is also true that in the majority of cases there is no obscurity, and sometimes it may be harmful to the offender as well as to society to explain illegal behaviour by a remote hypothesis.

The motivation of mentally normal and subnormal offenders is usually apparent to an informed and experienced observer. Obscurity is generally due to the fact that relevant information is purposely withheld from him. In mental deficiency, psychopathic personality, psychoneurosis or psychosis the motivation is often only disclosed as the result of a psychiatric investigation.

No special difficulty arises in differentiating psychopathic personalities who commit crimes from normal or subnormal persons, psychoneurotics or psychotics. Uncertainty regarding the boundaries of mental defectiveness and psychopathic personality, and the fact that the constitutional element is significant in both, appear sometimes to confuse their essential differences. And there can be little doubt that the forensic study of psychopathic personalities has been delayed through exaggerations regarding the frequency and importance of mental defectiveness in relation to crime.

Moreover, a distinction is equally important in civil life. It would surely outrage the public conscience if such persons as Joan of Arc, Napoleon and Lawrence of Arabia, listed as psychopathic personalities by Henderson and Gillespie, as well as other psychopathic personalities known to many of us, were proclaimed mentally defective persons and permanently detained in certified or state institutions for defectives. Let it be also remembered that mental defectiveness is incurable, and the assertion "once defective always defective" is still axiomatic.

The Joint Committee on Mental Deficiency of the Board of Control and of the Board of Education reported in 1929 that the diagnosis of mental deficiency may be established without a full history from the data observed by the medical examiner, but it can never be firmly sustained, however much it may be suspected on the evidence of history alone. This statement loses much of its accuracy when applied to psychopathic personalities, in whom a detailed, accurate and complete history may be much more valuable than a personal examination. Indeed, an experienced observer cannot live long in daily contact with a mentally defective person without becoming aware of his abnormality, but one may be on close terms with a psychopathic personality and have no knowledge of his disability.

Further, although Tredgold states that no niche can be found for the mentally defective person in which he can live without supervision, it is a matter of common knowledge that many psychopathic personalities order their lives usefully and

successfully.

The observer who fails to differentiate between mental defectiveness and psychopathic personality appears to have no place for persons whose ethical abnormality arises from disease after the age of eighteen unless they are mentally subnormal, psychoneurotic or psychotic, and therefore has no reason to offer which would carry weight in modifying the award in a criminal court in favour of the accused. But the psychopathic personality is well endowed intellectually as a rule, and there is reason to believe that treatment sometimes socializes his character and behaviour, when these are antisocial, to an extent which is advantageous to himself as well as to others.

No one who is constantly occupied with problems connected with the psychiatric aspects of crime can be satisfied with a position which fails to discriminate between mental defectiveness and psychopathic personality. From the clinical, medicolegal, therapeutic and research points of view this discrimination is essential for progress in the domain of forensic psychiatry.

FREQUENCY.

The number of psychopathic personalities in the civil population is unknown, since many never reach the psychiatrist's consulting-room, and pass through life with their mental abnormality undeclared and unrecorded by their associates.

Savitt reports that during the fifteen years 1920–1934 the average distribution of psychosis with psychopathic personality among first admissions from New York City to all institutions for mental diseases in New York State was only 2·17 per cent. At Creedmoor State Hospital during the fiscal year 1937–1938, the total number of patients admitted and diagnosed as psychosis with psychopathic personality was only 2·1 per cent. of all admissions during that year. But, as Savitt points out, only the small minority of psychopaths who have psychotic episodes reach a mental hospital, and his figures throw little light upon the number

of psychopathic personalities in the civil population.

Constitutional psychopathic state headed the list of principal psychiatric disorders in the American Army hospitals in 1938, and occupied second place to mental defectiveness in 600 neuro-psychiatric cases at a United States of America Naval Training Centre. Curran, in 1942, found that 5 per cent. of the cases admitted to Royal Naval Hospitals and Sick Quarters in Great Britain with neuro-psychiatric disorders were diagnosed psychopathic personality. Eliot Slater, in the same year, found, in a study of 2,000 neurotic soldiers in an E.M.S. Neurosis Centre, that 265 were diagnosed psychopathic personality, but the group "included all patients in whom there was held to be a constitutional abnormality of personality of fairly severe degree, mainly responsible for any neurotic symptoms or failure of adaptation. The abnormality might be of any type, and included, for instance, cyclothymics, long-standing hysterics, the severely and chronically anxious, as well as those usually included under this head."

Of 130 ex-service patients treated at the Royal Edinburgh Hospital for Mental and Nervous Disorders from the beginning of the war to the autumn of 1943, Stalker

found 45 suffering from psychopathic states as described by Henderson.

Estimates of the number of psychopathic personalities who commit crime vary with the concepts and personal bias of the assessor, and with the emphasis attached to the psychopathic syndrome. Different observers tend to give widely different

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estimates, just as still happens in regard to the association of mental defectiveness and crime.

The difficulty of assessing the proportion of psychopathic personalities in the criminal population becomes evident when the literature dealing with the condition is reviewed apart from its relation to criminal behaviour. The various groups are sometimes so ill-defined as to appear all-inclusive, but delimitation is necessary if we are to make clinical distinctions in a court of law with some degree of precision.

In a series of 4,000 juvenile delinquents Healy and Bronner found that 2.8 per cent. were psychopathic personalities, and they state: "We firmly stand against the diagnosis of psychopathic personality made simply on the basis of repeated misconduct without other signs of psychopathic trends—there are too many other causations of misconduct." I may add that prison experience in England and Wales gives full support to this view.

Dealing with psychopathic personality H. S. Hulbert declares: "The delinquent is rarely psychopathic." Kraines, on the other hand, expresses the view that:—
"These persons are ill, just as the psychotic patient; and the habitual criminal is a socially sick person who may have a recoverable or incurable illness, the true nature of which can be determined by proper investigation." The habitual criminal in England, however, is often a person who has deliberately chosen crime as a career, and may show none of the criteria considered necessary before a diagnosis of psychopathic personality or other mental abnormality can be made.

Prewer, in 1944, found that of 1,000 naval offenders received into Naval Detention Quarters, 87 were psychopathic personalities, and he excluded from this number 15 schizoid and 2 cycloid personalities. Service offences, however, for the most part, differ from crimes in civil life, and we have at the present time no data to show how many offenders are received into civil prisons whose crimes are associated

with psychopathic personality disabilities.

LIMITATIONS.

For practical purposes the mental conditions of delinquents and criminals are conveniently classified into six main groups: Normal, subnormal, mentally defective, psychopathic personality, psychoneurotic and psychotic. But the clinical picture is not always as clear as this statement might suggest, since the groups often overlap. For example, a psychopathic episode may occur in a mentally defective, psychoneurotic or psychotic patient, and a psychopathic personality may develop a psychoneurosis or psychosis.

In 1834 Prichard described moral insanity in a letter to Dr. Tuke as—"The mental state of persons who betray no lesion of understanding or want of power of reasoning and conversing correctly upon any subject whatever, and whose disease consists in a perverted state of the feelings, temper, inclinations, habit and conduct. Such individuals are sometimes unusually excited and boisterous; and others dejected (without any hallucinations), sometimes misanthropic and morose." In modern times the term "moral insanity" is translated "psychopathic personality," and important additions to the literature on the subject have been made by Partridge, Kahn, Schneider, Cheney, North, Levine, Petrie, Slater and many others.

In his Salmon Memorial Lectures Henderson emphasized the importance and place in psychiatry of the psychopathic personality, and stimulated interest in the clinical types. He also outlined principles for their social rehabilitation. He described them as "individuals who conform to a certain intellectual standard, sometimes high, sometimes approaching the realm of defect, but yet not amounting to it, who throughout their lives, or from a comparatively early age, have exhibited disorders of conduct of an antisocial or asocial nature, usually of a recurrent or episodic type, which in many instances have proved difficult to influence by methods of social, penal and medical care and treatment, and for whom we have no adequate provision of a preventive or curative nature. The inadequacy or deviation or failure to adjust to ordinary social life is not a mere wilfulness or badness which can be threatened or thrashed out of the individual so involved, but constitutes a true illness for which we have no specific explanation." Elsewhere, Henderson states: "The life histories of these patients teach us that we are dealing with persons who from a tender age, and out of a variety of causes, have proved a problem

to themselves as well as to the world at large, people who psychobiologically have remained at an immature, individualistic, egocentric level, who are determined to get their own way irrespective of the cost, who fail to grow up to any sense of reality, and are so changeable and fickle that they lack persistence of effort and are unable to profit by experience. Their emotional development and their judgment and forethought have not kept pace with their ideational component. Their conduct throughout life has been punctuated by disturbing episodes which have given rise to great anxiety. Their higher inhibitory control mechanisms are in abeyance, and they are dominated entirely by their emotional instincts."

Curran and Guttmann, discussing the social significance of psychopathic personality, maintain the view that—" Psychopathic personalities as such cannot be regarded as medical problems, although they are very prone to develop abnormal reactions which would bring them into the medical domain. The possession of an abnormal character leads to difficulty in adjustment in normal social life, and therefore such personalities frequently show up as petty criminals, vagabonds, prostitutes. It would, however, be quite wrong to assume that all abnormal characters are of a socially undesirable kind. . . . Psychopathic reactions are characterized by their transient, episodic, and often explosive character, and by their reactivity to environmental factors. The storm may be very violent whilst it lasts, and may take the most diverse forms—loss of temper, impulsive conduct, fits of depression and uncontrolled weeping, suicidal attempts, fugues—but it is usually soon over,

although it may be readily provoked again."

The psychopathic personality usually appears in the criminal courts as a nonsane, non-insane individualistic and discordant person. He may be of subnormal, normal or supernormal intelligence. Sometimes he presents evidence of exceptional ability, and this may be seen in several directions. Whether possessed of subnormal, normal or supernormal intelligence, effective output is often impeded by the fact that the necessary effort is ill-timed and ill-considered. Judgment is often biased, and action explosive as well as variable. The psychopathic personality is frequently incapable of making satisfactory social adjustments in particular directions because of transient and episodic anomalies of character, emotion, moral sense or sexual make-up. He is, for the most part, unable to put himself in the position of others, and consider the issue from their point of view or act accordingly. He fails to appreciate the fact that in human relations a common measure of thought and action is often indispensable. He may be tolerated within his own circle because there is a good deal of class loyalty in different grades of society, but in the constructive work of the world contacts must be made without as well as within a special group. He often fails because in modern society each one of us depends to some extent upon others for our personal comfort and wellbeing. Consequently we resent unreliability when we have a right to expect effective assistance, we refuse to tolerate aggression and injustice, and we are affronted by the selfishness of the egocentric if it violates the welfare of others and runs counter to accepted social prohibitions. It is characteristic of the different types of psychopathic personalities that they are unable to subordinate a short-term gratification to a long-term advantage. Many are unable to make a sustained effort of a particular pattern, to profit by experience and learn the restraining influence of reality. Some have insight into their condition. The impressive self-criticism of T. E. Lawrence, in spite of its beauty of expression, makes painful reading: "I began to wonder if all established reputations were founded like mine, on fraud . . . the praise-wages of my acting had now to be accepted. . . the praise-wages of my acting had now to be accepted. . . With men I had a sense always of being out of depth. . . . There was a craving to be famous; and a horror of being known to like being known. . . . To put my hand on a living thing was defilement. . . . I had a longing for the absolutism of women and animals. Many things I had picked up, dallied with, regarded, and laid down for the conviction of doing was not in me. . . . I was a standing court-martial on myself . . . the truth was I did not like the 'myself' I could see and hear.'

These are not the words of a happy man. They are recalled here in order to accentuate the fact that even the supernormal psychopathic personality may be unable to overcome his constitutional disabilities, and to show that his range of usefulness is restricted if his responses to stimuli are ruled by perverse urges and inhibitions. They also point to the fact that in our judgment of the psychopathic

personality we must consider, as in other cases of mental abnormality, not only an activity or series of activities, but their motivation.

Elsewhere I have described the criminal psychopathic personality tentatively, from the medico-legal aspect, as a person who, although not mentally defective, psychoneurotic or insane, is persistently unable to adapt himself to social requirements on account of abnormal peculiarities of impulse, temperament and character, which may require specialized medical and rehabilitative treatment, instead of, or in addition to, the ordinary methods of punishment, before his social reclamation is effected.

Omnibus descriptions are open to the criticism that they widely embrace different types, whereas only certain features of each are common to others. Curran and Mallinson head a recent valuable survey of the literature of psychopathic personality with the apt quotation: "I can't define an elephant, but I know one when I see one." And Kenneth Walker's reference to the story called "The Disagreement as to the Description and Shape of the Elephant," in which those who handle one in the darkness only understand it in respect of the part they touch, is not without significance for those who study this group.

Many of the cases seem to lie in the borderland between mental disease and anomalies of character rather than between mental disease and mental health. The Oxford English Dictionary defines disease as absence of ease. Horder says: "A disease is the sum of all those recognizable changes which result from the disturbance of the state of equilibrium which, being serviceable to the individual, we term "Health." Ryle defines a disease as "the whole consequence of a conflict between man (or animal) and the noxious agencies in his environment." He points out that the patient, the pathologist, the physician and the surgeon interpret the term differently, and he quotes Sydenham's observation: "A disease, in my opinion, how prejudicial soever its causes may be to the body, is not more than a vigorous effort of nature to throw off the morbific matter, and thus recover the patient." It seems clear that many psychopathic personalities judged by these standards cannot be regarded as suffering from disease. For their particular reactions often represent the man himself rather than the effect upon him of "noxious agencies" and "morbific matter."

The conception of character as the growing modifiable and self-regulating part of the personality is even more elusive. It covers the volitional and inhibitory phases of behaviour, and is the driving force which, to a large extent, is dependent upon intelligence and temperament. Shand describes the "Stages of Character" under three headings, which he says "roughly correspond to the three levels of mental development: (1) the instinctive, (2) the emotional, (3) the level of sentiment; and again roughly these three are represented in (1) the life of the animal, (2) the life of the child, and (3) the life of the adult human being. The first is the most perfect in organization; but also the most rigid, in which intelligence has least formative influence. The second is the most helpless, and marks the transition from a lower to a higher form of organization for which the guidance of the adult mind is indispensable. The third is the most plastic and comprehensive, but its organization is never completed. In it reflection, reason and self-control have their full opportunities; yet it is the region of folly and error, with which we can hardly charge the animals; of mistaken valuations followed by disillusions; of progress and decadence; of constancy and infidelity. It has never been understood."

The development of character is progressive, and for the most part advances more or less gradually. It is reasonable to believe that in some psychopathic personalities the advance ceases somewhere between the second and third levels of mental development mentioned by Shand, or in the lower levels of the third. In other cases it would seem that from various causes regression from a normal level of development to a lower has occurred.

CAUSATION.

The study of psychopathic personality stresses the importance of the constitutional factor if the aberrant behaviour cannot be traced to conflict, and is inconsistent with the particular or general situation under consideration—but in some cases the psychopathic activity appears to be related to early fixation, and in others to later psychical conditioning.

Moore thinks of constitutional psychopathic conditions as mild forms of insanity, and Partridge writes: "As compared with some of the other mental deviations, the class of psychopathic reactions may be said hardly to have arrived in psycho-

pathology.

Bleuler considers that: "We have here to deal with deviations from the normal in all possible directions and mixtures." If this comprehensive view is accepted, it would seem to demand an authoritative decision delimiting the standards of normal conduct. Often, standards of behaviour are said to be outside the range of normality because they extend beyond the assessor's personal experience, which may be quite limited in certain directions although extensive in others. And this very fact may lend an artificial air of authority to his pronouncements, just as when the hand of the Hindu fell on the trunk of the elephant in the dark and caused him to say, "This creature is like a water-pipe."

Slater calls attention to the fact that "with few exceptions the psychopathic personality is the result of a combination of hereditarily determined tendencies. which in other combinations might have led to normality or even to a superior type of personality." He stresses the fact that "character must be determined by many thousands of different genes, and it is difficult to isolate the fact in any

one.'

The study of psychopathic personality is very far from completion, and it would seem that we have not passed the stage when the scientific approach to the problem should be as simple as possible if it is to be constructive. Genetic and other studies therefore will be valuable only in so far as they relate to cases in which the diagnostic criteria are faithfully attested. It may be that here, as elsewhere, the general medical practitioner who studies different generations of the families he attends can contribute much to our knowledge. For he can study the effects of social and antisocial traits of character as they pass from the parents to their descendants.

Humphreys accepts the view that psychopathic personality, like mental defectiveness, represents arrest in development, especially mental development associated with social inadequacy. Chornyak writes: "Egocentricity is a normal stage early in childhood of personal maturation . . . this type of psychopathic personality is fixed at this early egocentric level because of damage to the most recently acquired areas in the cerebrum." Earl D. Bond suggests that the term egocentric psychopath may be more appropriately changed to idcentric psychopath on the assumption that there has been a lack of development either of the ego or superego. Sprague would seem to agree with Partridge. In discussing the psychopathology of psychopathic personality he states: "There has not been reported any structural pathology which would offer a somatic or neuro-pathological foundation for psychopathy. Hence we must consider it as a functional abnormality, a behavioural deviation from what is customary."

Binder analysed 350 cases of illegitimate pregnancy from material supplied by the municipal social agency of the city of Basle. One third were normal, one-sixth oligophrenic, and one-half psychopathic. Henderson stresses the importance in such cases of emotional conflicts and insecure living conditions in leading up to conduct disorders of the antisocial type. In 34 illegitimate persons under observation Henderson found 50 per cent. presented the picture of a psychopathic state.

If the clue to character is related to early memories, which in some cases become essential factors in the creation of aberrant behaviour, it seems clear that an innate factor must be present also, since the same memory arising at the same time in a sibling of a near age may have no untoward result. And since the different types of psychopathic personality differ so much from one another, the endogenous and exogenous causative factors may perhaps be most profitably studied in types rather than in the group as a whole.

Discussing abnormal characters Curran and Guttmann write: "It is perhaps worth mentioning that bodily anomalies frequently co-exist with the psychological anomalies in these abnormal characters, and all the so-called nervous symptoms, such as tremors, restlessness, profuse sweating, vasomotor lability with blushing and fainting and an allergic disposition are frequently found combined with the psychopathic anomalies, though detailed correlations have yet to be made. The same is true as regards morphological anomalies, often called stigmata, asthenic build, disproportion in physique, under-development of the secondary sexual characters or heterosexual features."

It is well to bear in mind, as Curran and Mallinson point out, that all abnormal characters do not in fact develop abnormal mental reactions: "The possession of an abnormal character does not in itself constitute a medical problem unless of course it is most illegitimately so defined." They also point out that "to equate psychopathic personality with abnormal character . . . approximates perilously to making the study of psychopathic personality co-extensive with the major part of psychiatry."

A practical view will accept the fact that neurological, bio-chemical, and psychological changes as well as inherited and more general environmental factors may so alter behaviour as to render the individual incapable of social adaptation.

Goltz's classical experiment, in which he induced a condition of "sham rage" in a dog by removing a large part of the thalamus, and the hypersensitivity to aggressive stimuli which is a feature of the thalamic syndrome in man are significant. Best and Taylor refer to the suggestion that certain conditions in man, for example, the manifestation of fear in cases formerly described as "shell-shock," the unreasoning rage in some cases of drunkenness, and the emotional instability of certain mental disorders associated with degenerative changes in the cortex, may be due to the release of the hypothalamus from cortical control. Le Gros Clark, discussing the relation of the functions of the frontal cortex and hypothalamus, refers to Elliot Smith's description of the former as the seat of the higher mental faculties, and he states elsewhere that the prefrontal areas may be regarded as "a final product of cerebral development where the activities of the purely cortical mechanisms underlying the intellectual components of personality are equated with the activities of the hypothalamic region which are associated with the more fundamental and primitive components." Cox refers to cases which show that lesions removed from the cortex may cause profound alterations in conduct, whilst Alpers in a recent study of the literature discusses personality and emotional disorders associated with hypothalamic lesions which were related to antisocial

The pathological findings in cases of encephalitis lethargica, and the effects of the disease upon personality and behaviour rendering the latter at times indistinguishable from the antisocial activities of certain psychopathic personalities, are well known. So too, the occasional result of accidental as well as operational injury to the brain on conduct. I have elsewhere described a case that would now be classified as psychopathic personality in which a young man received an injury to the head in the War of 1914–1918. Shortly afterwards his character changed and his career was marked by deceit, lies, thefts, extravagances and callous selfishness. A pulsating area due to trephining to relieve pressure on the brain was present over the left Rolandic area, together with paresis on the right side of the face, wasting of the right arm, weakness of the right hand, and an alteration of speech. The physical signs were clearly the result of damage to the brain, and it was reasonable to attribute the coincidental character changes to the same cause.

The criminologist, however, cannot disregard the fact that injury and disease may produce a pathological condition of the brain without evidence of psychosis or psychopathic personality. He must also consider the socializing effect on some psychotics of the modern operation of prefrontal leucotomy, and the significant fact that the static view of the central nervous system is undergoing modification. Golla has recently stated: "It seems as though the central nervous system can reorientate itself. If it cannot work in one way it will do so in another. . . . If there is dysfunction in one part another will take on its function."

Ingham considers that from the neurological aspect, constitutional psychopathic inferiority implies a failure in some important adjustment to environment largely due to innate constitutional conditions; and that this implies variation from the normal in the arrangement of the inherent structural patterns of the brain. He says: "To-day it is generally conceded that, in the last analysis, all thought and all behaviour are the results of physical and chemical reactions in living tissues."

Having regard to the similarity between the EEG's of aggressive psychopaths and those of young children, Hill and Watterson suggest that "cortical immaturity" is a factor in the causation of this type of psychopathic personality. They also consider that on the evidence gathered by them from control material and patients, as on that obtained by other workers, one can have no doubt that an abnormal EEG constitutes a handicap for its possessor in the matter of biological adaptation,

failure of which may result in emotional behaviour. It is interesting to note that in a group of 75 criminal psychopaths Silverman found 80 per cent. revealed abnormal or borderline abnormal EEG tracings.

A longitudinal section of the behaviour of elderly psychopathic personalities supports the view that ageing may assist in directing aberrant behaviour along socially acceptable lines. The fact that the values of life change with the years seems to be related to physiological as well as psychological influence, and the researches of various workers in physiological pathogenesis are stimulating. Such, for example, as the work of Broster and his colleagues on the adrenal cortex and intersexuality, the induction of alkalosis by means of hyperpnoea with resulting epileptic seizures by Lennox and others, and the observations of Hill and others on the effect of hyperventilation, hydration and hypoglycaemia in cases of "dysrhythmic aggressive behaviour."

The "experimental neurosis" induced in dogs by Pavlov as a result of the "clashing of excitation with inhibition" aroused in the differentiation of visual stimuli, and in sheep by Anderson and Liddell in the differentiation of auditory stimuli, are perhaps not without significance for the criminologist who wishes to take a wide view of the disorders of conduct. For the term "criminal habit" used in Acts of Parliament, in the law courts, in official documents and discussions, as well as by psychiatrists, sociologists, and others, denotes a very real phenomenon. And Pavlov's statement that "the different kinds of habit based on training, education, and discipline of any sort are nothing but a long chain of conditioned reflexes" is especially noteworthy when considering recidivism. Nevertheless, in the study of the neurological, bio-chemical and psychological causes of behaviour a facile and illogical tendency to argue from the particular to the general must be avoided.

Whether, as I incline to believe, the subject of psychopathic personality should be first studied in regard to the different types, or whether, as Curran and Mallinson suggest, its structure can be most appropriately approached by using the term in a wide sense, there will be general agreement that the causation of the aberrant behaviour of the psychopathic personality offers scope for much-needed research in many directions.

CLASSIFICATION.

Different authors have suggested various classifications of the many groups of psychopathic personalities, and the differentiation from psychoneurosis is not always clearly defined. This is particularly unfortunate in medico-legal situations, since dubious and widely comprehensive statements in a court of law add to the uncertainties connected with an already obscure subject, and to the insecurity of the syndromes of psychiatry.

The American Psychiatric Association classifies psychopathic personality: With pathologic sexuality—indicate symptomatic manifestations, e.g. homosexuality, erotomania, sexual perversions, sexual immaturity. With pathologic emotionality—indicate symptomatic manifestations, e.g. schizoid personality, cyclothymic personality, paranoid personality, emotional instability. With a social or amoral trends—indicate symptomatic manifestations, e.g. antisociality, pathological mendacity, moral deficiency, vagabondage, misanthropy.

mendacity, moral deficiency, vagabondage, misanthropy.

Healy presents four groups: the unstable egocentric personality, the constitutional inferior personality, the idiosyncratic personality, the psychotoid personality. Henderson refers to the predominantly aggressive, the predominantly passive or inadequate, and the predominantly creative.

The above, together with the classifications of Kraepelin, Partridge, Kahn, Schneider, Strecker and Ebaugh, Sadler, Bleuler and others have in common the fact that they all recognize the condition as essentially a disorder of social conduct. Normal conduct, however, is a theoretical postulation, and the injunctions and prohibitions of to-day will not necessarily be our standards and guides to-morrow.

From the medico-legal point of view psychopathic personality is associated with particular considerations, and the benefits to society which owe their origins to the aberrations of state builders, writers, musicians and others must be taken into account when estimating the harm inflicted by some psychopathic personalities. It may be misleading to limit the academic connotation of the term to overt

deviation of behaviour, since there can be no doubt that some homosexual psychopathic personalities, for example, lead irreproachable lives, and the activities in other groups are not necessarily antisocial unless a very wide use of the word is

accepted.

The classifications of some authorities support the view of White that psychopathic personalities occupy a place between the criminal and the insane. Nevertheless, even when conduct is grossly aberrant it may not be criminal. For example, de Saussure, in 1929, described the case of a pervert aged about thirty who had been married for seven years, and whose sexuality was fully satisfied by standing on his head and remaining in this position for thirty seconds. Other gross sexual perversions of a non-criminal nature, including coprophilia and solitary elaborately constructed sado-masochistic practices, are probably known to many of us who are field-workers as well as students.

I have suggested the following clinico-descriptive classification as useful in criminal cases: Psychic inferior personalities; aggressive egocentric personalities; ethical aberrant personalities; alcohol and drug addicts; sexual perverts; schizoid, cycloid and paranoid personalities. This classification, like many others, includes the sexual perverts. Henderson and Gillespie in their well-known text-book describe sexual aberrations among the psychoneurotic reaction types. In a later study Henderson refers to sexual offenders under the heading of psychopathic constitution. J. R. Rees refers to sexual perversions under the heading of psychoneurotic delinquency, and Hubert and East refer to the not infrequent association of sexual offences and psychoneuroses.

Perhaps the difference is largely a matter of emphasis. In psychoneurotic crime stress is laid on conflict, and the resulting reaction of the patient; in psychopathic personality on constitution, and the action which is normal to the individual.

I have excluded from the classification so-called kleptomania and pyromania because genuine examples of these conditions are, in my experience, uncommon; and when unconnected with the affective and schizophrenic or organic reaction types of disorder, or mental defectiveness, seem more appropriately considered among the epileptics, hysterics and compulsive-obsessive states. Some are malingerers. Dealing with hysteria in another connection, Anderson doubts whether it is entirely justifiable in all cases to include in the groups of hysterical characters pathological liars, swindlers, writers of anonymous letters and others. I would add that a similar doubt arises also when some of these offenders are included in the psychopathic personality group.

DIFFERENTIATION.

Discussions on the clinical varieties of psychopathic personality must accept the fact that one type often overlaps another, and just as the symptoms of many diseases are seldom present at the same time in any one patient, and an adequate description of an illness must usually present a composite picture of the symptoms in several cases, so, too, a composite picture is often required to feature a particular

type of psychopathic personality.

Psychic inferior personality.—In any community certain individuals stand out from their fellows because their characters and personalities are above the average. Others frequently, or constantly, demonstrate their inferiority in both particulars. When they are heavily loaded with inferiority, which markedly affects their social adjustments adversely, they may be regarded as psychic inferior personalities only if the disability is persistent. For no man can hope to be at his best at all times; anxiety, fatigue or physical illness may temporarily alter his reactivity and reduce his efficiency, but as soon as these are removed the normal man returns to his normal level of behaviour.

In many cases the condition appears to be essentially constitutional in origin, but at times the environmental factor seems to be of particular significance. If, for example, the head of a family holds strong patriarchal views and also enforces them with assertive zeal, he may secure obedience in the home and forfeit the growth of independent self-reliance in his children. The modern parent, perhaps wiser in his generation, usually cultivates a relationship with his children which encourages their affection and comradeship, and leads to a steady development of self-confidence which flourishes by the restraint, wisdom and experience of the parent

directing the enthusiasms, desires and energies of the child. Nevertheless, psychic inferiority may result when both parents and environment appear to be favourable, and it would seem that in these cases certain factors which contribute to the inferiority have been transmitted to the children through the parents acting as carriers.

Psychic inferiors are often good-natured and likeable people, facile, placid and sociable. But they lack will-power and resourcefulness, and avoid making decisions. Hence they are incapable of successful improvization, and follow the line of least resistance. They avoid responsibility, and are unable to deal with situations which require persistent effort. They readily form antisocial habits, and lack the force of character which enables the ordinary man to overcome the everyday difficulties of life. They are suggestible and often ill-advised in selecting their friends and acquaintances. Their emotional activity, for the most part, is blunted, and they are more willing as a rule to receive than to give. They may be, however, useful citizens within their individual limitations. They may be successful in married life if their partners are of the dominant type, able and willing to protect and guide them, and ready to accept the ever-present duty of shielding them from the vicissitudes of life. But if death, or a temporary difficulty or separation leaves the psychic inferior to face responsibility alone, he soon fails to maintain the social security to which he has been accustomed under the shelter of his lost companion. since he is essentially a parasite. Indeed, if it be true, as a modern writer* has declared, that in general we make the voyage of our lives by dead reckoning, it is also usually true that the psychic inferior personality is unable to steer a true course alone, even though he be assisted by the most modern equipment.

If criminal conduct is exhibited it may be markedly aggressive; murder and suicide may result. But usually the crimes committed are minor in character, and petty thefts, embezzlements, and the lesser forms of fraud as well as the less

aggressive varieties of sexual offences are frequent accompaniments.

Since the characteristic features of this type of personality are negative, and positive qualities are necessary for satisfactory social adjustment, it is not surprising that many psychic inferiors become recidivists. Their conduct in prison is related to their negative attributes. They are usually quiet, orderly, industrious, prudent, contented and well-meaning. They gain some measure of emotional discipline in the orderly routine life of prison. But the good intentions, which for a brief space actuate their social relationships on leaving prison, soon succumb to the stresses and hazards of life in the outer world, and they return to prison for offences which, on the whole, are more a nuisance than a menace to social security. Their incurability is not surprising since their character is founded upon an insecure basis, which prevents them from making the adjustments necessary for success in a complex modern world. Nevertheless, a measure of adjustment can sometimes be attained if appropriate modifications of the environment are assured.

This was a noticeable fact in the War of 1914–1918, when recidivists belonging to the psychic inferior group were absorbed into the Forces, and often surprised those of us who knew them by the manner in which they satisfied the authorities in the performance of their duties under the supervision of an understanding senior, and with the support they obtained from identification with the unit in which they served. At the same time the outcome of enlistment in the Fighting Services during wartime is unpredictable, since it depends upon the unknown stresses which may arise in future situations. Undoubtedly a proportion of those taken into the

Fighting Services become liabilities.

The following cases illustrate types of social inadequacy in this group:

Male, aged 26: Attempted suicide.—There was no family history of mental disorder. His father was an aggressive, domineering person who frequently thrashed him, and his cruelty to the boy was known to the neighbours. His brothers looked down upon him as a weakling, and there was a doubt in his mind as to his legitimacy. His mother was killed in a motor accident when he was aged eighteen, and her death deprived him of her support in all his difficulties as well as of her affection. He was on good terms with his sister. He left school in Standard VII and obtained work in a factory, but after a year his father transferred him to a colliery so as to earn better wages. Later, a month at sea was followed by enlistment in the Army during peacetime. He was unable to accommodate himself to the life, and made three

^{*} R. B. Cunninghame Graham.

attempts at suicide in order to obtain his discharge when he was upset by trivial occurrences. After 15 months' service he returned to civil life and obtained different employments, sometimes retaining them for a few months, at other times only for a few days. At the time of his arrest on the present charge he had made six other attempts at suicide, and had received two short sentences of imprisonment on different occasions for these offences. He had also served a short sentence for false pretences. The attempts at suicide were not accompanied by the histrionic features which Gillespie so aptly associates with the hysterical personality. They were not related to manic-depressive disorder, but they were responses to situations which an ordinary person would overcome without difficulty. He was rather above the average in intelligence, but was conspicuously inferior in his manner of life and method of dealing with life's problems. He was unable to establish friendships, but enjoyed outdoor amusements which were free from responsibility. His sexual interests were normal, and he had a love affair which ended when he suspected the girl of being friendly with another man. Observation over a period confirmed the diagnosis of psychic inferiority, and showed the importance of adjusting his life, as far as possible, to the inadequacies of his personality. The hope that he might attain a limited degree of success was encouraged by the fact that his physique and general health were good.

The following case was seen with Surg. Lt.-Cmdr. G. Tooth, R.N.V.R.:

Male, aged 38: Naval offence.—This rating stated that his father was intemperate and that his sister was in a mental hospital. He was sent to an Industrial School for theft and remained there until he was 16 years of age. He then went to sea for nine months, and since then has had many occupations for short periods only. He joined the Navy during the World War, but finding the life distasteful attempted suicide and also deserted in order to obtain his discharge. He had not served overseas and was never in action. He had been convicted in the civil courts nine times between the years 1924 to 1942 for wilful damage, loitering, being on enclosed premises and theft. He was untruthful in a purposeful manner and alleged, unsuccessfully, that his thefts were due to an impulse which he could not control. He read popular works on psychology, and used the information to excuse his civil and naval offences. He was alert and intelligent, but he was unreliable and lacked will-power. He was suggestible, and based his conduct on short term aims. He was unable to accept the ordinary difficulties and responsibilities of life, and desired to take all and give nothing in return. His emotional tone was blunted. He married a widow, but soon left her, and was unconcerned when she went to live with another man. He was inclined to boast of his civil and naval offences. He was solitary and without ambition; he was satisfied with his inadequacy because he failed to appreciate it. He worked well in prison and was well behaved. He found there the security and freedom from the difficulties of life against which he was unable to contend in the outside world. His health and physique were good. He was a psychic inferior with slight schizoid trends, and his future seemed likely to be unsatisfactory to society. It by no means follows that it will appear unsatisfactory to him. Indeed, if the years bring him parasitic ease he is likely to be content, although he remains in a backwater all his life.

Incorrigibility was persistent in the following case (previously recorded in the Report on the Psychological Treatment of Crime, East and Hubert).

Male, aged 74: Rogue and vagabond.—The family history showed no factors of medical importance. A brother had been in prison. His father was a respectable bricklayer and both parents were teetotallers. He was apprenticed to a trade, but found picking pockets as one of a gang more profitable, and at the age of 17 was sentenced to five years' penal servitude for frequenting the crowd at the entrance to Sadlers Wells Theatre and stealing a gentleman's watch. Eleven previous convictions were proved against him at the time, and although it may be thought that his future criminal career was determined by the long sentence imposed upon him, it seems likely that a criminal habit had been already formed. In addition to nine summary convictions as a suspected person, 43 offences were recorded between the years 1882 and 1937 for theft, suspected person, rogue and vagabond, attempted theft, and once for assaulting the police. For these offences he received sentences of imprisonment totalling 179 months, and terms of penal servitude amounting to 25 years. He had also been bound over on four other occasions.

He was well preserved physically and mentally. His health was good, and there was no evidence to suggest that he had at any time suffered from any mental disorder. He was alert, intelligent, quiet, sensible in conversation, and a rather likeable old man. He never married, but kept in touch with his relations, and they welcomed him to their homes when he was discharged from prison. He lived for the moment and was unable to take the long view. He was a wishful thinker who refused to acknowledge the realities of life, and was without ambition. He experienced little satisfaction when his crimes succeeded and little disappointment when they failed. He was not hostile to the society which had taken from him so much liberty, and never rebelled against the mischances of life. He was industrious and well-behaved in prison and had become institutionalized to some extent. He was a nuisance, but not a menace to society, and if his qualities of character had been less negative might have directed his life towards useful citizenship.

Psychic inferiority was associated with manic-depressive disorder which culminated in murder in the following:

Male, aged 45: Murder (two charges) and attempted murder.—His father was dead, but he remained in contact with his mother and siblings. No mental disorder in the family was admitted. He was a single man, and a near relative considered that he had never been able to stand alone. On leaving school he was employed at a newspaper office and was then apprenticed to a baker, and followed that employment for six years. During the war of 1914 to 1918 he served in France, and on demobilization obtained work as a labourer, and later was employed on night duty at an institution for about five years. Between 1925 and 1943 he remained at one occupation for two years, at another for a few months, and left both of his own accord. The greater part of these years was spent in prison. He served sentences varying from 18 months to 1 month for 30 offences: 14 were for wilful damage, others for false pretences, theft, fraud, being on enclosed premises, loitering, and twice for attempting to commit suicide. They were all trivial and might be regarded as indications of social inadequacy, and none were for violence against others. He was of average intelligence, but lacked the power to will or make sustained effort. He persistently followed the line of least resistance, and was unable to deal with the ordinary difficulties of life satisfactorily. The desire of the moment actuated his decisions, and he disregarded long-term advantages if they were opposed to short-term gains. He was unable to profit by experience or adjust himself to the realities of life. His emotional reactionapart from manic-depressive periods-was blunted; he was unable to make friends, and was unconcerned with his numerous sentences of imprisonment.

In later years his relatives became disturbed by the alteration in his character, and apprehensive at his occasional outbursts of excitement. Between 1933 and 1940 he made five attempts at suicide, and was twice certified as insane whilst serving sentences in prison. He was transferred to a mental hospital and was looked upon as a case of manic-depressive disorder.

He called at a lodging-house occupied by a widow and asked for accommodation. As he was being shown a room he demanded money from the woman, and when refused grasped her by the throat and said "I've got to kill you." She gave him some money and became unconscious. He then left her. Three days later he knocked at the door of another apartment house in the same district and throttled the landlady with his hands. He stole the money in her handbag and left her dead. Three weeks later he gained admittance to another apartment house in the same district, and killed the landlady by strangling her with a shoe-lace. Although this murder was also committed for gain he took nothing from the house. Two days later he gave himself up to the police and gave them a clear account of the crimes. Whilst awaiting trial the experienced prison medical officer found him elated, querulous, and aggressive. If crossed in any way he was at once resentful. He was suspicious, argumentative, and quite indifferent regarding the moral aspect of his crimes, which he freely admitted. He expressed no remorse for his victims. He was considered to be insane by the prison medical officer, but he did not come within the McNaghten ruling and the jury refused to accept the defence of insanity. At an after-trial inquiry into his mental condition he was certified to be insane and was transferred to Broadmoor Criminal Lunatic Asylum.

Aggressive egocentric personality.—Crimes committed by this type of psychopathic personality are often a danger to society, as well as to the offender. aggressive egocentric, like the young child, is over concerned about himself and resents the restraint which others impose upon his capricious self-indulgence and narcissistic outlook. He is not merely selfish, but also assertive, wayward, irritable, impulsive and unreliable. He lacks self-discipline, and makes little or no effort to control his instinctive urges in a reasonable manner. His unbounded self-confidence, conceit and exaggerated self-regard antagonize many of his associates. He is critical of others, but as a rule is uncritical of himself; he is difficult to persuade, as he believes himself to be the most important star in his particular constellation. He refuses to compromise in difficult situations, and meets opposition with impulsive and often violent behaviour. His general pattern of response is characterized by emotional tension, and he is often unscrupulous in his dealings with others. His egocentricity limits his ability to concentrate on matters which are unrelated to himself, but if his interests lie in idealisms, his true personality may not be apparent to those who are inexperienced in the unscrupulousness which is sometimes exhibited by the thwarted idealist.

Although the aggressive egocentric psychopath has confidence in his ability to meet difficult situations, he fails to recognize the difficulties which his intolerance creates in his relations with his associates. His ready acceptance of responsibility is an attribute of his aggressiveness, but it seems to be due, to some extent, to his inability to appreciate the chances of failure, and until this occurs he may be envied by his companions.

Crimes committed by offenders of this group range from murder to assaults, attempted suicide and sexual offences; drunkenness and violence to property as well as motor offences are frequently associated with the condition. The offender's reaction to imprisonment varies. Many, aided by the discipline and routine of the institution, control themselves and work well. Others are uncertain, aggressive, impulsive, undisciplined, explosive and unreliable. Occasionally a prison paranoia results

The successful, aggressive, self-confident egocentric is not included in this group of abnormal personalities. It is not merely a question of degree which here separates the normal from the abnormal, but the fact that emotional instability and an inability to profit by experience make the conduct of the aggressive egocentric psychopathic personality incalculable, unreliable and often dangerous. The qualities which require firm guidance if success is to be attained are uncontrolled, and act injuriously to the man himself as well as to society.

Male, aged 45: Throwing corrosive fluid with intent.—No reliable information concerning the family history was available. The prisoner had not suffered from any serious illness. There was no reliable history of his childhood. As an adult he soon came to be regarded by the police as a danger to society, a blackmailer and a bully. He first came to their notice at the age of 21, and was sentenced to two months' imprisonment as a suspected person, loitering. Later he was convicted of burglary and received a sentence of nine months' imprisonment. Still later he was bound over for malicious wounding; he struck a man over the head causing a wound which required six sutures. After this he was convicted of firing a pistol at a man at point blank range whilst playing cards because he had lost some money; he received a sentence of nine months' imprisonment. On completing this sentence he was convicted of receiving a motor car knowing it to be stolen, and was sentenced to twelve months' imprisonment. In the following year he was sentenced to ten years' penal servitude for throwing corrosive fluid over a woman with whom he had cohabited, and soon afterwards was sentenced to nine years' penal servitude for wounding an official with intent to do him grievous bodily harm. During his imprisonment he threatened the staff as well as his fellow prisoners, and violently assaulted the latter on two occasions. His general health was good. He was alert, intelligent, and showed no evidence of idiopathic epilepsy, psychoneurosis or psychosis. His explosive outbursts were excessive responses to situations which would not have produced a trigger-like reaction in a normal person. His egocentricity was marked. He was selfish, conceited, assertive, irritable, explosive, quarrelsome, and without thought for the feelings of others. He declared that he preferred to deal personally with anyone who he thought had wronged him. He was boastful and untruthful. After a prolonged medical interview on one occasion, and perhaps because of it, his conduct remained satisfactory for some months, but the improvement was not maintained, and further episodic explosions occurred. He remained unable to profit by experience, and short-term aims regained their ascendancy over long-term advantages. He was so satisfied with himself that it seemed unlikely that he would be able permanently to adjust himself to social requirements.

It is recognized, of course, that successful aggression feeds on its victims. The bully reinforces his aggressiveness at their expense. This phenomenon is so common that it cannot be considered abnormal. Indeed, in his distorted way the bully profits by experience. This man, however, over a long period received disciplinary awards for his violent misconduct in prison. He was unaffected because of his inability to profit by the past, and this, together with the facts recorded in his history, brought him within the group of unstable egocentric abnormal personalities.

A climax was reached at the beginning of manhood in the following case:

Male, aged 26: Murder.—The homicide came from a respectable home; both parents were alive, and his father had been employed by one firm for 20 years. Two brothers older than himself were married, a younger sister was unmarried, and another was dead. No mental abnormality was recorded in the family history. The prisoner left school in Standard VII, and was transferred to a central school and reached the highest class. On leaving school he obtained employment at a good wage, but left at the age of 17 after a quarrel with his father. He then enlisted in the army but disliked the life, and his father obtained his discharge. After a period in civil employment he rejoined the Army but was discharged on medical grounds. At the age of 18 he deserted a girl who had become pregnant by him. He went out with another girl, and soon afterwards attempted to strangle a third girl who made disparaging remarks about her. After leaving the girl unconscious he gave himself up to the police, and as a result was sentenced to detention in a Borstal institution for three years. He had previously been convicted of theft. During this sentence he boasted about his wanton acts; he was arrogant, conceited, and callous, but well behaved. On his release from the Borstal institution he married the girl he had attacked. Subsequently he was convicted and sentenced to periods of imprisonment for

stealing a cycle, stealing a motor car, and for robbery. He attempted suicide twice, and served a short sentence of imprisonment for one attempt. His wife made ample provision for him when he left prison after the robbery, but he gave way to violence and spent his time drinking with different women. At the time of the murder he was wanted by the police for bilking a taxi-driver. When his wife was out he broke open the gas-meter and stole the contents, and having strangled their child with his wife's stocking left home. He spent the money drinking with women, and when it was exhausted gave himself up to the police. He appeared to have been fond of the child, and the motive for the crime was undisclosed and could be only assumed. There was no reason to think that he was under the influence of drink at the time. The death sentence was commuted to penal servitude for life.

There was no evidence of psychoneurotic or psychotic disorder. He was mentally alert, and above the average in intelligence. He was impulsive, irritable, aggressive and selfish. Apart from the effect of drinking, the explosive violence to himself and others, which temporarily relieved the rising emotional tension of the moment, was so opposed to his long-term interests and so ungoverned by experience that it was evident an exaggerated response was produced by slight episodic impacts. At the same time the long period of controlled behaviour in the Borstal institution was misleading when an attempt was made to estimate the usefulness of his future career.

It is important to differentiate the above types of offenders from the criminal whose aggressiveness and violence form part of his stock-in-trade:

Male, aged 37: Possessing firearms to endanger life.—He was a married man with several children, but at the time of his present crime had not lived with his wife for a considerable period. He had been previously convicted for thefts, and on two occasions had been discharged on his own recognizances for these offences. On the third occasion he was sentenced to three years' detention in a Borstal institution. This was followed by a short sentence for loitering, and subsequently of penal servitude for robbery with violence. He was working with a gang of criminals and knocked a man down in the street and robbed him of £300. On the present occasion he was concerned with others in a Post Office robbery, and when arrested tried to get at a loaded revolver he was carrying in order to shoot the police and escape. At the Borstal institution he was found to be intelligent, alert and energetic. He was quick-tempered, but was able to control himself. He placed too high a value upon his capacity, and over-estimated his importance in the labour market. He was found employment by the authorities on discharge from Borstal which would have led to steady advancement, but he exchanged it for other work which was better paid and only temporary. He wrote from the Borstal institution: "I can stick to anything when my inclination lies that way, not for honesty's sake, but because it suited As I had urgent need of money at that time I turned to the only means I had of obtaining it in any quantity. So I took the situation laughing up my sleeve, as it were, at the people who thought I would work for such paltry wages. During that time I was still engaged thieving to make up what I considered a living . . ." This statement expressed engaged thieving to make up what I considered a living . . ." This statement expressed much of his outlook on life. He was a clever mechanic and could have earned good wages, but he was vain and unscrupulous and had chosen a criminal career determined to enjoy the profits. He was callous and selfish, untruthful and brutal. His crimes were not the result of psychoneurosis or psychosis, but were committed with a full realization of the chances he took. He could control himself when he wished to do so. His violence was not the trigger-like response of the unstable aggressive egocentric psychopathic personality, but the cool, determined aggression of the calculating terrorist. It was not surprising that when his conceit was vanquished in prison and he found terrorism availed him nothing, distortion occurred, and a mild prison paranoia resulted.

Ethical aberrant personality.—The essential character features in this group are an unusual forcefulness of several instinctive urges, an exaggerated emotional instability, an abnormal deficiency of will-power, together with a lack of ethical understanding and an inability to profit by experience, so great that in spite of normal or superior intelligence the individual is a danger to society and sometimes to himself.

Under the heading of Constitutional Ethical Aberrations, Bleuler includes "enemies of society, antisocial beings, moral oligophrenics, moral idiots and imbeciles. Moral insanity." But the factors which produce antisocial behaviour and crime are so complex that it is important, from the medico-legal and research points of view, to restrict the grouping of mentally abnormal criminals to the generally accepted syndromes of psychiatry. It will often be found very difficult to consider that an enemy to society or an antisocial person is, by that fact alone, an abnormal person in the ordinary use of the word.

Moral sentiments are gradually acquired, and their growth depends upon the teaching, practice, code and custom accepted by parents, sibs, teachers and associates. Many enemies of society and antisocial persons as well as criminals are

such as the result of faulty instruction and training. Their unlawful activities arise from environmental conditions and mental conflicts which can often be traced to their origin without difficulty. Others, from a variety of causes, select crime as a career. But in many ethical aberrant personalities environmental conditions are entirely favourable as far as can be judged, and no conflict can be attested as the cause of their criminality.

Burt, like many others, is dissatisfied with the term moral defectiveness, and as an alternative suggests temperamental defectiveness. Henderson and Gillespie, and some others, now use the term psychopathic state or psychopathic personality

for this group.

Their numbers are small, and as I have already stated, the ethical aberrations sometimes arise as the result of a mentally disabling illness affecting the patient after he has reached the age of eighteen, and therefore excluding him from the moral defective group. The mental abnormality appears to be similar, and may be expressed in the same way as in the cases which occur earlier in life. They may be considered as examples of moral insanity, but from the medico-legal and research points of view are usually conveniently included, as here, among the ethical aberrant personalities.

The clinical criteria of this group are so well known that only a brief reference to them is required. As I have said, the intelligence may be normal or supernormal. Excitability, instability, irritability, quarrelsomeness, spitefulness, cruelty and destructiveness are usual features. Acquisitiveness, aggressiveness and sexuality predominate and may be uncontrolled. Priority of self against all others, a callous indifference to the rights and feelings of others, and an absence of affection accompanied by lack of forethought or wisdom, together with a permanent inability to appreciate the importance of reality and the value of communal rights and conventions, are distinguishing criteria. Although emotional regard for others is absent, strong uncontrolled emotional displays in situations which oppose the egocentric desires of the individual are frequently exhibited.

A lack of ethical understanding does not of itself constitute this psychopathic condition. Indeed, the ethical aberrant personality may display verbal morality in his discriminating replies to ethical perception tests, but he fails in their practical application to situations which concern himself. And since the offences result from the exaggerated activities of many instincts in the same individual, the criminal record is seldom restricted to one class of offence, as so often happens in the case of the habitual criminal. Some pathological liars and pathological

swindlers belong to this group.

The crimes committed by the ethical aberrant personality include murder, attempted murder, assaults, arson, rape, indecency, theft, fraud, embezzlement, damage to property, and the like. They are usually committed for an inadequate purpose, and are distinguished by a lack of concealment and disregard for the results. An almost constant indication of the condition is the fact that the associates of the ethical aberrant personality recognize that his conduct is unusual and that he cannot be relied upon. So it comes about that he commits crime alone.

Discussing the occasional effect of brain injury on conduct in the section on causation above I have briefly alluded to a case in this group. Other examples are described in some detail in my book on *Forsenic Psychiatry* under the headings of "Moral Imbecility" and "Moral Insanity."

A recent case is the following:

Male, aged 42: Murder.—There was no record of mental abnormality in the family history. From an early age this homicide was a thief and a liar, often for no apparent reason. At the age of 16 his father refused to let him live at home as his conduct was intolerable. There was no reliable information regarding his occupations in earlier years, but he appears to have enever had any settled employment. He was a clever designer, but was unable to apply his conspicuous talents with any degree of regularity, and his behaviour was so erratic that his career was marked by an occasional success which was followed by a series of failures. He married an estimable lady for her money and position; he had no sexual interest in women, and flagrantly practised homosexuality before and after marriage in a manner which was intended to hurt his wife's feelings. For the greater period of their married life they lived apart, but he persuaded her to become a Roman Catholic in order to prevent her from divorcing him. He frequently quarrelled with her, and used the most profane and obscene expressions to emphasize

his hostility. He ordered valuable presents to be sent to her as a peace-offering and to regain her favour, but he left her to pay for the article. Over a period of years he obtained very large sums of money from her, but his enterprises consistently failed, and in these and other directions gross extravagances were only paid for by the generosity of his wife. In spite of her constant kindness and consideration he circulated scandalous and wholly untrue statements about her. He also made outrageous statements about important people who had incurred his displeasure. On one occasion he was bound over at the police court for an assault on a man, and on another occasion for using threats. He was suspected of having wantonly killed a valuable dog he owned. He threatened to kill himself because a young homosexual accomplice became interested in a woman. He sent his wife a letter on black-edged paper saying he was about to commit suicide, and followed this up with further threats to do so. At this time he came under the notice of a psychiatrist who made a diagnosis of moral defectiveness, and he was admitted into a mental hospital, but he shortly afterwards escaped and did not return.

He strangled a youth who was his homosexual partner at the time, and the next morning the maid on entering the room found him in bed asleep with the corpse by his side. He then locked himself in and turned on the gas-fire without lighting it, and when the room was forcibly entered was found lying by the fire more or less unconscious. His career was punctuated with revolting homosexual experiences, deceit, lies, frauds, cruelty, aggressiveness, and a complete disregard for the rights and feelings of others and of social prohibitions in general. He was a teetotaller, and was not a drug addict. His abnormal conduct was persistently callous and unexplained by the immediate situation. He did not consider the probable consequences of his indulgences and had no remorse for his conduct, but there was no lack of ordinary intelligence. The details of his vicious and criminal activities fill very many pages, which confirm the diagnosis of moral defectiveness, or ethical aberrant personality. He refused to allow a defence of insanity to be raised at his trial, and was sentenced to death. As the result of an after-trial enquiry into his mental condition he was transferred to Broadmoor. The diagnosis was independent of the homosexuality of the patient, except that in this feature, as in the rest of his conduct, wanton selfishness and callousness were outstanding.

It is clear that there are several factors common to the aggressive egocentric personality and the ethical aberrant personality as outlined above. They may perhaps with some fitness be looked upon as subgroups of an idiosyncratic personality group. But the classification adopted in this article is intended to bring into prominence the fact that in criminal cases aggressiveness is the dominant feature in the one, and lack of morality in the other. It seems that this distinction is useful in present-day studies of psychopathic personalities and crime.

Alcohol addicts.—Discussions on alcohol addiction have been, perhaps, more adversely affected by bias than most other debates on social problems. MacCurdy's statement that "the alcoholist is before he ever touches a drop an abnormal person" expresses only a partial truth for those who doubt whether anyone is normal. Trotter's dictum that "In the tragic conflict between what he has been taught to desire and what he is allowed to get, man has found in alcohol as he has found in certain other drugs a sinister but effective peacemaker, or means of receiving for however short a time some way out of the prison house of reality back to the Golden Age" eloquently declares a psychological fact. But it is not universally applicable if we accept the view that some alcohol addicts drink although they are unencumbered by disagreeable experiences or unpleasant thoughts. For although alcohol provides a method of escape for some, it also furnishes others who are carefree with an added pleasure, and it is an interesting fact that in classical antiquity convivial excess appears to have been frequent among the most prosperous sections of society.

Some persons seem to take alcohol in order to raise their affective tone to normality, and others to raise it from normality to a euphoric level. The former blindly search for emotional ease, the latter less blindly and less excusably for unusual pleasures.

The alcohol addict may be defined as a person with some insight who is unable to forego his habit, or maintain a reduction of his intake to an innocuous amount, in spite of the fact that he is causing injury to himself and others by his indulgence. Before deciding that he is a psychopathic personality, appropriate emphasis must be given to his mental constitution. For it must be remembered that indulgence in alcohol may be a symptom of other mental disorder; particularly in criminal cases, when it is often associated with manic-depressive disease, general paresis, the psychoneuroses, high-grade mental defectiveness or epilepsy. Some alcohol addicts seem to arrive at that state as the result of habit alone. I have already referred to the fact that the psychic inferior personality is frequently an

habitual criminal, and there seems to be little doubt that some alcohol addicts belong to the psychic inferior group because of the ease with which they form certain habits if they lack the positive qualities of mind required to resist them. But it is important to study the individual in this matter rather than generalizations. The middle-aged man who has hitherto led a normal life, and then indulges in alcohol in order to escape from domestic and business anxieties when his mental and physical abilities are beginning to decline, may be suffering from fatigue, anxiety, reactive depression or other mental disability, but is not likely to be included in this group of psychopathic personalities if he has previously been abstemious.

In the absence of psychosis, psychoneurosis, mental defectiveness, or evidence of psychic inferiority, it may be considered that the alcohol addict belongs to a special type of psychopathic personality if his addiction cannot be traced to a relevant cause other than an apparently inherent inability to make social adjustments without its assistance; if it arises before or during the early years of maturity; if it persists although the addict is aware of the injury he is causing himself and others by his inability to forego a transient psychomotor stimulus and euphoric effective tone; and if he is unable to order his life on a long term basis in this matter.

The release from morbid inhibitions which alcohol produces may seem to be advantageous. The removal of shyness, for example, resulting in an easy sociability lends an attractive feeling of power to the addict, and seems desirable to him in spite of the manner by which it is attained. In everyday life we see the transition from seclusive introversion to companionable extraversion by the aid of alcohol. But it is also common knowledge that the release from morbid inhibitions effected by alcohol has an adverse result and gives rise to antisocial behaviour. Thus, in cases of constitutional or acquired homosexuality overt activity may be inhibited by social and ethical considerations, but is likely to be expressed if the higher controls are narcotized by alcohol. Similarly with exhibitionism, sadism and masochism. The picture may be complicated by the aphrodisiac action of the drug, but the matter is mentioned as it exemplifies the manner in which one type of psychopathic personality sometimes overlaps and influences another.

The path of the lawyer and administrator, as well as of the diagnostician and therapist, will be easier when we know more about the predominating factors associated with alcohol addiction. The view that it is attributable to inheritable influences leaves some inquirers dissatisfied. Perhaps part of the answer is at present hidden in the unsolved actions of chemical substances upon the human organism. And perhaps modern research is narrowing the field of exploration as it narrows the pathological conditions directly ascribed to alcohol as a poison. Thus, the distinguished members of the Alcohol Committee set up under the Medical Research Council refer to the modern work of Wechsler, Minot and his colleagues as well as of Joliffe and others, which indicates that the so-called alcoholic peripheral neuritis is not due to alcohol itself, but to the failure of the diet of the alcohol addict to contain amounts of the vitamin B complex. The statement of Caldwell and Hardwick in their survey of neuropsychiatric studies in vitamin B deficiency that "recent work strongly suggests that some mental disease is produced by a lack of these accessory food factors" may be shown by future research to be significant here also.

Psychopathic personalities of this group, like other consumers of alcohol in excess, may commit almost any offence. Homicide and other crimes of violence are particularly frequent. No offence is pathognomonic of the condition, but periodicity and the commission of similar activities on repeated occasions may suggest its psychopathology if manic-depressive disease, epilepsy, obsessive and menstrual mental aberrations are excluded. The general characteristics of the alcoholic psychopathic personality are well known and need not be repeated here. It may be noted, however, that on reception into prison symptoms of deprivation may appear in the form of irritability, depression, insubordination, aggressiveness and hostility. If persistent they generally denote a significant degree of mental deterioration.

Drug addicts.—Adams divides drug addicts into four main classes:

I. Stabilized addicts, who never exceed a certain, usually, small quantity which is, as a rule, employed for its stimulant effects. They are, to all appearance, normal useful persons bearing none of the ordinary stigmata of addiction.

2. Accidental addicts, who have acquired the habit through legitimate medical treatment, or through want of caution in the administration on the part of doctor or nurse, or through self treatment for some painful ailment, or who, without any positive evil in their nature, have drifted into indulgence through bad example or bad surroundings.

3. Natural addicts, people of inadequate personality, drawn from the type of persons variously termed "psychopathic" or "psychoneurotic" or "mentally unstable." They are peculiarly liable to become addicted if circumstances are

favourable.

4. Criminal addicts, who use drugs in search of new sensations, or to fortify themselves for a life of crime or for depraved motives, such as the search for aphrodisiacs.

Adams points out that not all are agreed whether a cure should be attempted in the first class. Many in the second class desire to be cured and often are cured by judicious treatment. A large number in the third class have no real wish to be cured, and in all cure is difficult and relapses common. In the criminal addict cure is almost hopeless.

More generally, drug addicts may be studied according to their use of narcotic and non-narcotic drugs. The addictions of the latter do not usually lead to criminal behaviour. Narcotic drug addicts may be divided into those who use, for example, morphine and its derivatives to ease physical and mental pain, or cocaine for its pleasurable effects, and those who use barbiturates for their hypnotic effect and often when there is no real insomnia. The number of drug addicts in this country who commit crime as a result is insignificant.

In all cases of morphine and cocaine addiction a character change, directly attributable to the use of the drug, sets in so quickly that an addict may commit crime early in his addict career. Whether all those who take these drugs habitually to their own disadvantage and that of others, and cannot permanently abstain, belong to the psychic inferior group or to a special group of psychopathic personalities, is, perhaps, doubtful. But in a wide view of psychopathic personality associated with crime it seems desirable to consider them in a special setting.

The Mayor of New York's Committee on Drug Addiction in 1931 found that of 318 males treated—the majority using heroin, and the remainder, except a very few cocainists, being morphinists—50 per cent. were constitutional psychopaths, and the majority of the remainder were criminals, vagrants, paranoid personalities or homosexuals.

Sexual perverts.—A true sexual perversion may be described as a persistently indulged sexual activity in which complete satisfaction is sought and obtained without the necessity of heterosexual intercourse. Slater found in the group of 265 psychopathic personalities to which I have already referred, and which included a wider range of persons than is accepted in this article, that an inhibited sex life was especially frequent. He found a similar result in 137 mentally defective persons in the same investigation. Slater observes that this inhibition "is clearly a quality of deep biological significance, and it may be that it is genetically associated with factors that make for inferiority of intelligence and temperament." I would add that in many sexual perverts coming before the criminal courts sexual inferiority is a noticeable feature.

Sexual perversions associated with criminal behaviour were considered in a Report by Hubert and myself in 1939, and more recently by me elsewhere. It will suffice to recall here the fact that exhibitionism is the most frequent perversion seen in the criminal courts, homosexuality, paedophilia and sadism less frequently, and fetishism as well as transvestism infrequently. I have personal experience of only three cases of necrophilia and one of pygmalionism associated with crime. Bestiality is usually a crime of convenience.

Schizoid, cycloid and paranoid personality.—Attention may be drawn to these types of mental constitution if they show marked social maladjustment in their daily lives. The solitary, shy, retiring schizoid given to day-dreaming and taking little interest in the external affairs of life may declare himself by his eccentricity and unsociability; the cycloid, at times elated and at times depressed, by the clashing of his mood swings with the activities of his companions; the suspicious asocial paranoid by his biased interpretation of the intentions of others, which canalizes his thoughts and limits his conduct to provocative responses. They are

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frequently seen of course in ordinary civil life, and need no special consideration here.

If they commit crime and are examined in cross section whilst awaiting trial their mental condition may resemble early schizophrenia, manic-depressive disorder or paranoia, but after sentence further observation will show the unprogressive nature of their disability. Although a crime may appear to have little connection with the mental aberration of these offenders, it is important to remember that their personal difficulties in civil life may become exaggerated in the ordinary prison surroundings if these are unadapted to individual requirements.

TREATMENT.

Psychopathic personalities present particularly difficult problems to lawyers, administrators and psychiatrists. We cannot expect those who are responsible for social security to be greatly interested in the subject so long as offenders who are a little unusual are classed together without any differentiation. I believe that until our knowledge of the subject is greater we can study the criminal psycho-

pathic offender best through the clinical types set out here.

Generally surveyed, the psychopathic personality belongs to the non-sane, non-insane group of offenders, and the penalties usually applied to others who are sane or insane are often unsuited to them. Some differ so little from the normal that any special medical recommendation to the court would affront the offender and disturb the public conscience. A few are so abnormal that they must be regarded as legally insane in their own interests and those of society. The majority of cases lie somewhere between the two extremes, and present varying degrees of culpability. The question whether medical treatment or punishment, or a combination of the two, should be administered can only be determined by the judicial authority after the facts in each case have been carefully reviewed. I believe that a sentence of imprisonment adds force to psychological treatment in some cases, and assists in adjusting the psychopathic personality to his environment. If the special penal institution to which I presently refer is established, experimentation can be also made in the adjustment of the environment to the psychopathic offender.

The significance of the constitutional factor of the psychopathic personality has discouraged therapy, and an enthusiastic advocacy of psychological treatment must be avoided until results on a sufficient scale of well-attested cases are published. The many conditions met with in psychopathic personalities are peculiarly resistant to treatment. O'Mally states psychoanalysis as a therapeutic measure seldom produces here satisfactory results. North considers that the prognosis is more favourable when serious manifestations of psychopathic behaviour do not arise before adolescence. Levine believes that the psychopathic personality is often more difficult to treat than the neurotic, because the difficulties of the former often have a large element of pleasure connected with them which he is unwilling to forego. Silverman holds the view that treatment of psychopaths along psychotherapeutic lines has not been fruitful. Probably all those who have long experience of these varieties of offenders will largely agree with these findings.

Perhaps the constitutional factor is sometimes over-emphasized. In another connection Aubrey Lewis points out that constitution is the more or less stable product of the interaction of heredity and environment whilst the organism is developing. And perhaps Glover had something of this in mind when he said that there is a considerable difference between analysing a drug addict and analysing a drug addiction. The clinical fact remains that in many cases treatment must be directed toward the long and difficult task of amending the character of the offender rather than the speedy dissipation of a collection of acquired symptoms.

Preventive treatment is all important, and the earlier its application the better will be the effect. To ensure this end medical men require training in mental hygiene, and it should not be difficult for them to appreciate when a case should be examined by a psychiatrist. The provision of more psychiatric units and outpatient clinics will facilitate both the in-patient and out-patient treatment of psychopathic personalities.

The Criminal Justice Bill, 1938, indicated the direction of official thought in the modern treatment of crime, but it cannot be denied that in this country public opinion lags far behind, and for the most part is uninterested in the subject. It is beginning to bestir itself in some directions, and post-war planning should impress the fact that although society must be protected from the criminal, he, too, must be protected from himself as well as from society.

The prevention of crime and the treatment of the individual offender is a problem of social science as well as of penology. It is sometimes suggested that the psychiatric approach to crime provides a sentimental excuse for wrongdoing, and that the credulous acceptance of psychiatric opinion subverts the principles of moral integrity and social security. This view is encouraged by the great variety of personal traits which are sometimes put forward as evidence of mental abnormality, but which seem to be no more than the ordinary variations of character we find from time to time in ordinary persons.

Medical and supervisory treatment during probation from the court, or short sentences of imprisonment, often fail. And although a short sentence may be an appropriate award for an offence committed by a psychopathic personality, it is often inappropriate for the reclamation of the offender and useless as a punishment. It should therefore receive little approval from an informed public. We are here concerned with one of the most difficult problems associated with mental abnormality and crime. It is far from solution. Modern psychiatry is, however, dynamic, and new methods of investigation and treatment are being introduced. When accepted methods fail the remedy lies in awarding a substantial period of detention in a special institution established on lines somewhere between a prison and a mental hospital, as proposed by East and Hubert. Such an institution administered on colony lines by the Prison Commissioners would protect the public from major as well as minor crimes, and enable the psychopathic personality to be studied closely, and the possibilities of his re-education and reclamation to be explored.

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