

*Le Suicide: Étude de Sociologie.* Par EMILE DURKHEIM.  
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The ablest and best known studies of suicide have hitherto been written from a psychiatric, psychological, or, at all events, medical standpoint. The interest of the present very able and detailed study of the matter is that it is the work of a writer who desires to be above all a sociologist, and who, as such, has gained a distinguished reputation throughout Europe. It is true that Professor Durkheim invokes the assistance of history, ethnography, and statistics—"without which sociology can do nothing"—but he regards suicide as, above all, a social manifestation, and he considers that the sociologist deals with realities as definite and solid as the psychologist or the biologist.

The author classifies suicides into three main classes, as (1) egoistic, (2) altruistic—chiefly found in lower stages of civilisation,—and (3) anomic, or those due to sudden social disturbances, like an economic crisis. He considers that this classification itself indicates the chief causes of suicide. But before expounding it he discusses with great care and acuteness the extra-social causes usually put forward to account for suicide—psychopathic conditions, race and heredity, climate and temperature, imitation,—and seeks to determine the part, if any, possessed by these alleged factors of suicide. It is only necessary here to state briefly the outcome of the chapter on the psychopathic factor.

If suicide is always a form of insanity, the author remarks, it must be an individual manifestation, not a social manifestation. He quotes Esquirol, Falret, Moreau de Tours, and others who so regarded it, and then argues that if suicide is a form of insanity it must be a monomania, and he proceeds, in approved fashion, to demolish the whole conception of monomanias. But it might be claimed that, though not a special form of insanity, suicide only occurs during insanity. It certainly may be an episodic "syndrome" of insanity; is it always so?

Such a conclusion, the author remarks, would be precipitate. Because an act may occur during insanity, and even put on a special character then, it does not follow that the insane man does not share such aptitude with the sane man. To test this he proceeds to classify suicides taking place during undoubted insanity, and finds that they mostly belong to four classes: (1) maniacal suicide, (2) melancholic suicide,

(3) obsessional suicide, and (4) automatic or impulsive suicide. In all these groups there is either no motive at all, or a purely imaginary motive, and the author argues that it is an abuse of words to attempt to thrust into these insane classes a suicide which has its motive in real and reasonable grounds. Even Esquirol, he points out, admitted certain exceptions, and the door once opened it is difficult to close it. But granting that suicide is not necessarily a form of insanity, it may be asked, do not other slighter psychopathic conditions, such as neurasthenia, play a part in producing it? Professor Durkheim admits that a general neuropathic or neurasthenic state—which he describes very graphically—presents the psychological type most frequently associated with suicide, but with that admission the facts are still not accounted for; if suicides are in ratio with the general neuropathic tendency, then, since there are by accumulation a greater number of insane women than of insane men, suicide should be commoner among women. Again, the Jews, who are specially liable to insanity and other nervous affections, rarely commit suicide, and there is great difference in different countries and among different religious communities. The countries where there are fewest insane are, indeed, on the whole, those where there are most suicides—Morselli's contrary conclusion, it is pointed out, being due to mixing up idiots and the insane. The suicide rate has therefore no definite relationship to the tendency to insanity, nor, by induction, to a neuropathic diathesis, and so vague an influence cannot be accepted as completely accounting for so definite a social fact as the suicide rate. In a similar manner the author deals with the alleged influence of alcohol, and by the help of four maps of France comparing the incidence in the different departments of suicide, of the consumption of alcohol, of crime due to alcohol and of alcoholic insanity, he shows that there is no tendency to coincidence. The conclusion of this interesting discussion is that while degenerescence, in its various forms, constitutes a soil eminently suitable for the action of the causes which determine a man to kill himself, it is not itself one of those causes.

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*Leitfaden der physiologischen Psychologie.* Von Professor Dr. TH. ZIEHEN. 4th edition, with 23 figures. Jena: Fischer, 1898. Pp. 263. Price 5 mk.

In reviewing the English translation of this introduction