

PART III.—PSYCHOLOGICAL RETROSPECT.

1. *French Retrospect.*

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In the present retrospect we shall attempt to give, as briefly as possible, what is more interesting or important in the numbers of the "Annales Médico-Psychologiques" from September, 1871, to July, 1872, both inclusive.

Case of Ambitious Mania with Transitory Maniacal Attacks.

In this paper, by Dr. Dagonet, we have the interesting story of one of those people, who, certainly insane, appear more rogue than fool, and are a frightful torment to all who have the misfortune to have anything to do with them. It is needless to refer to all the amusing and characteristic events in the life of the patient related by Dr. Dagonet, for we have, unfortunately, plenty such in this country. It is from this class of individuals that are derived the men who come into prominence during popular excitements, political, religious, or otherwise; who, already insane, become outrageous through the surrounding commotion, and proceed to all sorts of extravagances and follies, and who are at last taken care of by their friends or the officers of the law, and are again set at liberty when such a step is deemed advisable. Well may it be said of these unfortunate people, "they are the scourge of their family, as they are of society, and especially of the physicians and magistrates who have the sad duty of having anything to do with them. They overwhelm them with their complaints and recriminations, they direct incessant attacks against them, they infuse into their persecutions a passion, a kind of rancour, which already characterised their troublesome mental disposition, and, to employ the happy expression of a distinguished professor, from being the persecuted, as they say, they become veritable persecutors." During the great alarm and excitement which prevailed in Paris in September, 1870, Dr. Dagonet's patient ran about the streets with a white flag, with a red cross thereon, and the following inscription:—"Peace, liberty, humanity, democratic fraternity among all people. Jesus, Mary, vive la nation! Joan of Arc, virgin and martyr, defend us." Now it does appear remarkable that such a person, a man who it would seem had been a nuisance and mischief maker for twenty years, should in three weeks be discharged, and thus allowed to begin his old habits, and to persecute the doctor under whose care he had been placed. Un-

doubtedly such patients are dreadful pests in asylums, destroying in great measure all discipline and order; but it is very questionable if we are therefore justified in getting quit of them by turning them loose on the public. Since all unprejudiced men are agreed that the population of asylums should be kept as low as possible, let all harmless demented depart to private dwellings, but at the same time let such unruly spirits as the one under notice be detained for lengthened periods, so that every effort may be made to teach them regular and industrious habits.

On the Diagnosis of General Paralysis, clinically considered.

We have here the conclusion of Dr. Drouet's paper. He presents us with cases illustrative of the various difficulties besetting the diagnosis of general paralysis, and dwells more at length on the danger of confounding some cases of senile dementia and chronic alcoholism with that disease. The following extracts will indicate, so far, the opinions of Dr. Drouet on this subject:—

“Let us say at once that the confusion is greatly due to the inexactness of the terms employed by the specialists of our day. The word *general paralysis*, indeed, is quite as inappropriate to indicate a pathological entity as the word *alcoholism* to designate another. General paralysis is only a symptom (a very important one, it is true) of a disease of the central nervous system, capable of being detected through a great number of other symptoms, of which the collective presence is pathognomonic. Alcoholism is, and can only be, a cause of disease.

“Under these various appellations is concealed, in our opinion, a single and distinct organic disease of the central nervous system, now demonstrated through numerous researches made with the microscope. If this affection be indicated by disorders of the general sensibility, amnesia, incoherence, enfeeblement of the mental faculties, inequality of the pupils, hesitation of speech, trembling of the tongue and hands, if it is complicated by the hallucinations and illusions characteristic of alcoholism, if previous intoxication of the patients by means of fermented liquors be proved, if no grandiose ideas exist, and finally, if enfeeblement of the power of movement be not yet well marked, physicians hesitate, and rightly, too, to diagnose general paralysis, that is to say, really a symptom which is not present. They then employ the term chronic alcoholism. But if the paralytic symptoms come to be added to those already enumerated, or if the disease be complicated with optimistic delirium, they agree in affirming the existence of general paralysis.”

After stating that the paralytic symptoms are to be regarded as the result of organic changes in the nervous centres, and as indicating the disease in its worst form, the writer continues:—“How can we believe, besides, in the existence of two affections so nearly allied that they appear to the most experienced eye to be constantly trans-

formed into one another? How can we admit that these diseases have so many points in common that it is impossible, during very long periods, to distinguish the one from the other? Is it not more logical to consider these cases as belonging to a single organic affection, varying in its external manifestations according as it is localised in this or that part of the cerebral or medullary nervous substance, according as it is more or less advanced, and is secondary to this or that cause?"

We have given enough to show that the paper is worthy of careful perusal, and to cause us to look forward with interest to the results of his pathological investigations, which alone "can demonstrate in an irrefutable manner that the very various symptomatic disorders of which we have just spoken are due to a single histological lesion, always the same in nature, but more or less diffused throughout the various nervous organs which, taken together, constitute the cerebro-spinal system."

On the Influence of the late War upon Mental Derangement in France.

At a meeting of the Société Médico-Psychologique, on 26th June, 1871, a paper was read by Dr. Morel on the "Pantophobic Delirium of some Melancholics (*aliénés gémissieurs*), with the influence of the occurrences of the War upon the manifestation of this form of insanity." We shall again direct attention to this communication, but in the meantime pass on to the discussion which followed its reading. As the subject is really one of great interest, perhaps we may be pardoned for dwelling on it at some length, even though it be of no special scientific value. The probabilities are that, during the present generation at least, no such dreadful calamities can befall France and its great capital as those which have recently crushed that unhappy country.

In his paper Dr. Morel insisted especially upon the very great frequency of pantophobic delirium as a result of fear of invasion by the Prussians, and of great distress arising from the war. Dr. Bourdin considered the subject of the causation of mental disease one of great difficulty, about which many rash statements are made. He believes that events, of whatever nature they may be, have only a secondary action in the production of mental disease; that they act only when they find a place prepared for them; otherwise they remain without effect. He considers that great civil commotion acts only on the form of the disease, not upon its essential nature; and that, to show the really productive influence of recent events, it would be necessary to prove that these events have caused special pathological forms. Dr. Morel had, however, failed to do so. After some further remarks on the mental condition of children begot during the war, and on the number of suicides, Dr. Legrand du Saulle began his account of the mental condition of the inhabitants of Paris during the events of

1870-1. He altogether denies that political events exercise a very marked influence upon the development of insanity, or that any become insane through these causes except the predisposed; because, he adds, these great social commotions are only of a temporary nature. We would willingly relate at greater length Dr. Legrand du Saulle's views on the causation of insanity, and make a few remarks thereon, but must be very brief. First of all it is evident that too little attention is given to the differences between the predisposing and the exciting causes of insanity. Secondly, the probabilities are that statistics referring to asylum population during periods of civil commotion must of necessity be defective, and that any views founded on such data must be open to grave suspicion. To us it appears that from the very circumstance of the case it is impossible to arrive at an accurate numerical estimate of such a question; but it might easily be settled, one way or another, by means of facts already in our possession. We would look at the matter in the following way:—Let it be granted that in a given population there exist at a given time a given number of people (say *tén*) predisposed to mental derangement. Now, were these people entirely protected from external exciting causes, such as arise during the struggle of life, it is quite evident that they could become insane only through exciting causes arising within their own bodies, as, for instance, from parturition, epilepsy, and such like. They might even pass their lives without ever becoming insane, though strongly predisposed thereto. On the other hand, let these same people be exposed to the calamities and hardships of war, to loss of friends, property, and employment, to anxiety about their own lives and the safety of their relatives, and the result must be that some of them break down and become insane. We, however, do not urge, like Dr. Morel, that a special form of insanity is produced. All experience points to the conclusion that unusual excitement precipitates the occurrence of mental disease. In support of this statement we can appeal to what occurs in this country during communion seasons and times of so-called religious revival. Here accurate statistics are easily enough procured, and the deduction therefrom is quite conclusive. But the fact is, that to decide such a point we should not appeal to statistics which, according as they are prepared, prove anything or nothing, but we should deal with the question in a large and philosophical way.

After Sedan the fears of the extra-mural population of the Seine became intense, and were increased by the absurd reports of the cruelty of the Prussians. When the terror was at its height it is interesting to observe that it produced very dissimilar effects. "Some, and these composed the minority, were silent, broken-hearted, calmly resigned; others, excited with anguish, screamed, vociferated, cursed the invaders, were so agitated that they were incapable of making the slightest preparation; some wept, lamented, moaned, constantly repeated the same words, regretted that they had lived so long, and

called for death; others quaked, were afraid of everything, were scared, anticipated evil in every quarter, and, true victims of sensorial illusions, they believed they heard tramping of the scouts' horses, the inauspicious tolling of the alarm bell, or the whistle of the advance guard of the enemy, and believing that they were about to be seized and immediately killed by the troops, they ran to conceal themselves in some obscure corner. At this time some sudden cases of suicide occurred." From the beginning of August until the 15th September, 1870, the number of individuals insane, or supposed to be so, decreased somewhat, at least the number presented at the Municipal Dépôt for Lunatics was smaller than usual; a result easily explained by circumstances. When Paris was invested matters became very bad indeed. "Intellectual excitement was general, activity was consumed in badly organized proceedings, in useless speeches, in expensive professional idleness, and in attacks of excessive drunkenness. The workman read the newspapers, did no work, drank the whole of his pay without regard to thrift. His wife and children were at home, or wandered about the streets; pecuniary difficulties threatened them, misery stared them in the face."

The Sergents de Ville and the Gardes de Paris have disappeared since 4th September. The National Guard was charged with the police arrangements of the city, and arrested suspicious persons who prowled about the fortifications. The crowd mistook them for Prussian spies, and sometimes maltreated them. They were lunatics at liberty, wandering about without any special object.

"Among the people of this description I examined one day a supposed German, nearly disguised as a priest, and engaged in some mysterious intrigues. He wore a very long black beard, spoke with surprising facility, and presented himself with an almost intimidating assurance. He was a French missionary, he was zealous and brave, and knew China and Japan as well as Paris and Bicêtre. He had been everywhere, and many times his reason had been temporarily obscured. I found him exalted, but lucid, and certainly inoffensive. He returned a second time, covered with numerous contusions. He had been maltreated near the Prison of Vincennes by a drunken patrol. I reprimanded this repetition of his old offence; I engaged him to act as military chaplain. I still reported favourably upon his mental condition. What became of him? On the 24th May, 1871, at Roquette, at 7.45 p.m.—the first of the hostages—he was shot! He was called the Abbé —.

"Whilst the National Guard brought every day to the Dépôt men in all stages of drunkenness, the government of national defence received numberless letters from a multitude of advisers, for the most part affected with some partial delirium or general paralysis in its first stage."

At this time many cases of melancholia, some of them very bad, appeared in women. They were characterised by prostration, weeping,

moaning, pantophobia, hallucinations of hearing, dislike for life, and refusal of food.

It is quite evident from Dr. Legrand du Saulle's account, that great and most laudable efforts were made to provide for the comfort of the multitudes who were thrown upon the care of the government at a time when it was embarrassed in every direction. But in spite of all that could be done, great suffering prevailed as winter advanced; provisions became scarce, small-pox and other diseases carried off hosts of victims. As a result of all this, drunkenness greatly increased. The following is a picture of the city during December:—"At the Depôt, if alcoholic delirium is far from diminishing among men, it is more and more frequent among women. Horse-flesh is so scarce and dear that many people soak their bread in wine. The most varied disorders—the most trivial as well as the most grave—begin to affect the intelligence and the cerebro-spinal system, and there is observed a very considerable number of cases of subacute alcoholism, with delusions as to persecution, fears of being pursued, captured, and shot, hallucinations of sight, great distress of a dismal, melancholic character, thoughts of suicide, absolute sleeplessness, &c., &c. Genuine cases of monomania of persecution also occur, but general paralysis is rare. Some women, already presenting the most evident signs of great physical impoverishment, become the victims of profound melancholia." In January matters had come to a very bad pass indeed, as the following fully proves:—"During the whole month of January the cold was excessive; the newly-born and the aged died in frightful numbers. Milk could no longer be procured for children and the sick; the allowance of provisions was wretchedly small, the bread was black, fuel was everywhere scarce. At the doors of the canteens and of the municipal stores for meat and bread, it was necessary to wait so long that many women, shivering with cold, could not endure the fatigue and suffering which such a position involved. They returned home without provisions, yet supported themselves in a most mysterious manner. At length they fell into a profound state of depression and debility, quenched their urgent thirst with wine and water, and some of them, in a short time, suffered from intellectual confusion, illusion of the senses, and genuine delirium, all arising from inanition. In proportion as they were more regularly and more wholesomely fed, these cases, touching victims of the seige, diminished and disappeared, as did also the nervous symptoms mentioned. In the space of a few days I had to examine many cases of that rare condition which has been described under the name of *stupidité*, and which is now more correctly called *mélancholie avec stupeur*. The patients were motionless and insensible; they looked from them in a very confused way, scarcely heard, did not suffer pain, could with difficulty pronounce a few words, and were overcome by an internal delirium of a melancholy nature, of which they were conscious, and about which they had a perfect recollection after their return to

mental health. Their eyes were half open and fixed, their saliva flowed from the mouth, they passed their stools involuntarily. They had sometimes terrific hallucinations; they then made desperate attempts to injure themselves by mutilation or suicide." At the time when the preliminaries of peace were signed and an armistice concluded, the cases of insanity were chiefly of a kind in which depression was the leading feature; the majority did not require confinement in an asylum, but were in great want of good bread, fresh food and wine.

During the reign of the Commune the municipal machinery was quite disorganised. The National Guard brought scarcely two lunatics a-day to the Dépôt, although the average usually varied between seven and twelve. Delirium tremens became of frequent occurrence, and was of a bad type and rapidly fatal, and, as a result of the very serious reverses of fortune—through commercial disasters or loss of employment—the acute forms of mania and melancholia appeared in those predisposed to insanity.

It would be easy to continue making extracts from this paper, but it is unnecessary at present, especially as M. Lunier intends to produce a work with reference to what occurred in the lunatic asylums during the war.

On the Pantophobia of some Melancholics.

In this paper Dr. Morel considers the subject in a general manner, and also in reference to the effect of the late war in producing a class of cases to be hereafter described. Having given a general description of extreme and chronic cases, he proceeds to sketch another class, whom he calls "panophobes plus sociables." "These cases are numerous in our asylum for women, and the moral causes which have afflicted us during those disastrous years 1870-71, have not been without influence, but quite the contrary, in increasing the number of cases of this description. We cannot, moreover, be astonished that, for reasons easily understood, this variety of insanity is observed much more frequently among women than among men.

"In our asylum of Saint Yon during this year we have had numerous cases of pantophobia. The women labouring under this affection presented themselves to our observation in two different conditions. In one they appear agitated, constantly moving about, and are victims of all the pangs of fear and despair. They say they are condemned to be burned, buried alive, &c., and nevertheless, they cease not to repeat that they are innocent, and that they have done nothing to deserve the latter punishment. Sometimes, however, they reproach themselves with offences so insignificant that we are tempted to think that they do not talk seriously. When, the day after their most violent and frantic lamentations, we attempt to show them how mistaken they had been in their predictions of the day before, they will say that they have only been delayed, and will fix on to-morrow for

the accomplishment of their torment. It is the physicians, the attendants, more rarely individuals not residing in the asylum, who are to be their executioners. Nevertheless, such patients, and this is a characteristic sign, never exhibited any dislike or hatred towards those about them. Contrary to what we observe in cases of monomania of persecutions in some maniacs, in epileptics, or general paralytics in the first stage, they do not become violent, they do not threaten violence or assault," &c. Dr. Morel believes that it is only in exceptional cases of pantophobia that we observe suicide or hallucinations of sight and hearing; he thinks he can even go to the length of stating that, in cases of pantophobia free from all hereditary influence, he has never observed suicide, if we except what may be called *indirect suicide*, through refusal of food. Another feature in these cases is that they are incapable of playing a part, of dissembling as to their impressions, of deceiving one as to the reality of their abnormal sensations, as is done by some patients who have power enough to simulate recovery, and thus obtain their discharge; they are essentially more or less echoes, repeating in spite of themselves not only their own internal impressions, but the impressions of patients belonging to the same pathological family. Such cases have been observed to imitate the peculiarities and gestures of one another.

From the length of Dr. Morel's paper, it is a somewhat difficult task to give in a brief summary anything like a correct idea of the subjects touched on. Having given a sketch of the mental condition of the inhabitants of the Seine-Inférieure at the time of the invasion by the Prussians, he proceeds to record a number of cases to show that though pantophobia is not a new disease, yet the terrible years 1870-71 increased such cases to an unusual extent. He summarises the cases as follows:—"I think I have produced a sufficient number of observations to demonstrate the intimate relation of cause and effect between terrifying impressions and the delirious manifestations of certain pantophobic and lamenting (*gémisseurs*) lunatics. Depressing mental suffering in individuals, with pre-existing emotional excitement, powerfully aid the action of fears and terrors which assault minds in the midst of social convulsions and the horrors of an invasion. I do not pretend to have described all the perturbations and diseases of the nervous system which were due to the influence of fear and terror, and which all practitioners have observed in the unexpected exhibition of hysterical or epileptic attacks in persons who have been greatly alarmed. That was not my object. I wished to show how much the influences which I describe contributed to develop that variety of the *vesaniæ* which I have described under the name of pantophobic delirium of certain wailing (*gémisseurs*) lunatics. These patients are worth the attention of observers, as constituting a special variety of the great genus melancholia of the ancients, and of lypemania of Esquirol."

Dr. Morel then proceeds to consider the differential diagnosis of

this special class of cases, and in doing so treats the reader to what finds but little favour in this country in the present day. We refer to the classification of lunatics according to the mental symptoms. This system, when faithfully carried out, leads into such confusion that it appears to defeat the chief object of any classification—simplicity. According to the skill of the operator, we believe that the delicate hair-splitting process may be carried on until we arrive at what may be considered complete success in that department, every case forming a distinct class by itself. We then discover that we are exactly where we began, and in our disappointment condemn all classifications as snares and delusions.

On the Employment of the Bromides in the Treatment of Nervous Diseases.

At the meeting of the Société Médico-psychologique, on 31st July, 1871, this subject was again discussed. Dr. Legrand du Saule did not consider the intensity of the eruptional acme an indication of the favourable action of the drug. In some very fortunate cases, however, he had not seen any eruption; besides, at an advanced age, the eruption due to the action of the bromide scarcely appears, or is altogether wanting, whilst, nevertheless, the convulsive disease improves in a very marked manner. The principal objections which he makes against the use of the bromides are the air of silly satisfaction which many patients present, slight stupor and drowsiness, slight disassociation of ideas and words, the difficulty in writing, the changes which appear in the body of the writing, and the unfortunate and unconscious facility of writing one word for another, as is done by some aphasiacs. The drug also acts as an aphrodisiac, and produces a most troublesome form of acne; fœtor of the breath has also been produced, but this may be avoided by giving the salt in an enema. The speaker noticed other matters in connection with the use of this drug, praising it especially as a hypnotic, but it is unnecessary to notice the subject further.

Asylum Notes on the War.

At a meeting of the Société Médico-psychologique Dr. Foville gave some very interesting information as to the effects of the war upon the patients at Charenton. From the asylum vast military movements and engagements could be observed, yet the majority of the patients took no interest in them whatever. Some of them, quite able to understand what was going on, refused to be convinced as to the reality of what they saw, and maintained that the whole thing was intended to deceive them. One patient repeated daily that this pretended war was in reality only a comedy, of which all the scenes had been previously arranged between the Prussians and the French government; the guns and cannons were only loaded with powder; all reports as to the number of killed and wounded were pure invention.

If by chance a ball had been fired, it was by some rogue who had secretly slipped it into his rifle, for no cannon had been charged with ball; it was noise, and nothing more. Doubtless many people were caught with the farce, but he was not one of these.

Another patient, who called himself Paul-Emile, and who believed himself destined by God to ascend the throne of France, read the newspapers regularly, and appeared to follow all the events in a very intelligent manner; but he affirmed that he was not fool enough to accept as real either the accounts which he read or the incessant discharge of artillery which he heard. During the second siege and the terrible cannonade of the last days of the struggle in the streets of Paris, he maintained the same position; even yet he declares that he has never been the dupe of all that people have told him, that all the noise which was heard was produced by some fools who pretended to fire the cannon to amuse themselves, but whose real end was to cause him to lose all patience, and to have a pretext for causing him to perish with hunger by reducing more and more the allowance of food.

A more interesting case, however, is that of a captain of the Imperial Guard, who, labouring under delusions of persecution and numerous hallucinations, was admitted into Charenton some weeks only before the declaration of the war. One might indeed have expected from his profession, from his having numerous relatives in the army, from his comparative lucidness, which on many subjects was perfect, that he would have been one of the inmates who would have been most interested in the military events, and who would have followed the disasters of the war with the greatest attention. Exactly the opposite occurred. The declaration of war, the defeats of Woerth and Reischaffen, the great battle under Metz, the siege of that city and of Strasburg, the disaster of Sedan, the fall of the Empire, the substitution of the Republic in its place, the investment of Paris, the capitulation of Metz, through which his regiment and all his comrades became prisoners, the conflicts under Paris, of which he saw with his own eyes various episodes, the bombardment of the forts, which he heard incessantly, the capitulation of the capital, the defeats of Chanzy and Bourbaki, the insurrection of Paris and its deplorable consequences, the second siege, and the re-organisation of a new French army, all were to him as if they had never happened. Each event was related to him by several people, but he would not believe a word of what he was told. He never ceased to maintain that France was at peace, the Emperor at the Tuileries, that all means of communication were open, and that we made common cause with his persecutors by refusing to forward his letters to his parents, and by withholding their answers to him; that all the noise made about the house by the cannonading was the work of some officers of his regiment—his open enemies, who were bent upon annoying him, and whom he mentioned by name. All means were employed to convince him, but

without success. He resisted all arguments, replying to them by taking exception to them, or by systematic denial.

Dr. Foville himself gave him the newspapers which related at length the great events which followed one another in a manner so disastrous for France and its army. He read them without the least emotion, and returned them, remarking, with an ironical smile, that it was a journal printed by his enemies, solely to deceive him; he then upbraided Dr. F. in a friendly way for becoming an accomplice in the fraud. One day he received five or six different newspapers, all of the same date, relating to the same facts; he read them with the same incredulity, maintaining that they were all sham newspapers, printed for him alone by his persecutors, so determined were they not to desist, cost them what it might. Having furnished other particulars about this patient, Dr. Foville remarks—"The interest which appears to me to be connected with these observations is not a simple matter of curiosity. Captain Z., like the other two patients of which we have just spoken, and many other analogous cases, were all lunatics with delusions of persecution, of whom it is usual to speak of as labouring under a partial delirium, and who were called some years ago, or are still called, monomaniacs. But, without wishing to attribute to the word "monomania" the very limited meaning of delirium upon one single point, which very few psychologists would maintain in the present day, are not the facts observed by M. Drouet, and those which have now been related by myself, of a nature to shake very strongly even the less exclusive theory, according to which, through the mutual independance of the faculties, there would be but a partial lesion of the faculties in monomania, without a general alteration in their harmony? For our own part, that which has struck us most in this kind of test of experimental psychology, the elements of which were furnished by the great events which history shall ever keep in remembrance, was beholding the point at which the perversion of *appreciations*, lesion of the intelligence, and the abolition of judgment became profound and general in lunatics apparently rational in so many respects; and on seeing to what an unexpected extent delusions in appearance most limited become developed, I ask myself if ever, in a medico-legal case, one could affirm that an act committed by a monomaniac had no relation to the subject of his delirium."

On Stupor in Mental Diseases and on the Mental Disease described under the name of Stupidité.

In a very long paper Dr. Dagonet summarises the chief opinions and observations of various writers, and adds also those of his own. He believes that, though the affection about which he writes has already been the subject of numerous and important works, its history has appeared to present gaps, especially when viewed in its pathological manifestations, in regard to the circumstances in the midst of which it is developed. It appeared to him that the confusion which still

existed in this respect might to a certain extent explain the contradictory opinions which have been entertained on the subject.

According to Dr. Dagonet, all cases of stupidité may be arranged into two classes—those cases with delirium and those without it. It must not be imagined that the presence of delusive ideas, which are always imperfectly co-ordinated, and of abnormal sensations, or the absence, prevent the cases, when viewed in this manner, forming different stages of one and the same disease. We should not in all cases consider this affection a special form, a very marked variety of melancholia; and though we must allow that it is one of its most frequent consequences, we ought not the less to admit also that it may appear under conditions altogether different, that it may come on after other diseases, and that indeed it may occur in a primary form, and from the first present the characters which are peculiar to it. According to the confession, indeed, of some patients, it may exist without any sad thought or delusion engaging the mind. We are thus forced to consider and describe it as a special form of mental derangement, not to be confounded with others, whatever may be its origin, whether it appear spontaneously or as a transformation of other diseases.

Before passing on to the rapid examination of the principal phenomena which characterise the disease and the circumstances in which it may be developed, Dr. Dagonet makes some remarks on its nomenclature. He considers the word “stupidité” badly chosen, and not scientific. He suggests as improvements stuporalgia, or stupemania.

When cases of stupidité are examined psychologically, they may be divided into two classes. In the first class the suspension of intellectual life is, we may say, complete; the stupor is in its most intense form. There may be vague, incoherent ideas, and purely automatic acts, but these are not to be regarded as the expression of any kind of thought. In the second class the suspension exists up to a certain point, since the most elementary ideas, such as those of time, place, space, &c., are absent; but then it is accompanied by a sensorial delirium of the greatest intensity—a gloomy delirium, with more or less marked depression; the patients retain some recollection of their condition, and are conscious of the derangement which affected their mind, and of the obstacles which prevented them using their faculties. Doubtless these two conditions must correspond to different disorders, sometimes dynamical, of the nervous system; but in the actual state of our knowledge we should not hazard a conjecture in this matter.

The patient labouring under stupidité, whatever the cause which has led to the development of his disease, presents a characteristic physiognomy which may itself indicate several conditions of the mind. Sometimes the stupor is accompanied by an undefined dread dependent on the strange and painful sensations which the patient experiences. The features are then contracted, and the expression, marked by

sadness, discloses, nevertheless, by its animation, the persistent activity of thought. Sometimes, on the contrary, the features are relaxed, and the expression denotes inactivity, even the absence of thought, or at least the scarcity of ideas. The eyes are sometimes closed, at other times directed towards the same object, or timidly looking to the ground; they often indicate that kind of amazement which appears to cause in the patient the confusion of his ideas and sensations, the difficulty in thinking, and the diminution in the exercise of the psycho-cerebral functions. This double expression which the physiognomy presents, either of vague terror or of more or less complete inactivity, corresponds pretty closely to the two different psychological conditions. In one case, indeed, the delirious ideas, the morbid sensations, are developed to the utmost extent; in the other, on the contrary, we may say that hallucinations, terrors, fixed ideas, do not exist, or only in such an imperfect state that they do not leave on the mind of the patient any trace of their transient existence, and do not exercise upon him any characteristic influence.

We might go on extracting paragraph by paragraph, but such a method would scarcely convey an idea of the many interesting topics treated of in this paper by Dr. Dagonet. Besides, it is quite as unsatisfactory to attempt a regular abstract for two reasons; first, much of the matter in the paper being the condensed result of extensive reading and investigation, to reduce it further might make it almost unintelligible—second, the remainder of the essay is devoted to the consideration of minute details which cannot be condensed without frustrating the purpose for which they were written. Dr. Dagonet records many interesting cases in illustration of the topics treated by him in his paper.

On the Influence of Alcoholic Beverages upon the Increase in the Number of Cases of Insanity and Suicide.

In a memoir read by Dr. L. Lunier in 1869, he expressed the opinion that the increase in the number of cases of insanity proceeded almost exclusively, during a certain number of years, from the increase in the number of cases of general paralysis and of insanity caused by the abuse of alcoholic beverages. In the present paper he proceeds to show the results of his researches upon this greatest cause of the increase in the number of lunatics.

Having collected an immense variety of statistics, and having arranged them for minute investigation, Dr. Lunier draws the following conclusions therefrom:—

1. Spirituous liquors, and particularly those made with beet-root and grain spirits, tend, all over France, to be substituted for natural beverages, such as wine and cider.

2. In the departments where lately cider was the only beverage known, its consumption, and consequently its production, tend to decrease.

3. In these same departments, and generally in all those which produce little or no wine, the consumption of vins ordinaires, which began rapidly to spread in these districts, cannot in the present day withstand the competition of the alcohols of the north, the cheapness of which tends to generalise the consumption.

4. Spirits (alcohols d'industrie), which at first were only consumed in some departments of the north, have, during the last twenty years, gradually passed into use throughout the whole of France.

5. Taking the whole country into consideration, the consumption of alcohol has almost doubled between the years 1849 and 1869. It has now reached 2 lit. 54 per head.

6. In the same period, or more exactly from 1857 to 1868, the relative number of cases of insanity from alcoholism has increased 59 per cent in men, and 52 per cent. in women.

7. In the departments which produce neither wine nor cider, but produce alcohol, the annual consumption has increased in twenty years from 3 lit. 46 to 5 lit. 88 per head.

In these same departments the proportion of cases of insanity from alcoholism has increased from 9·72 to 22·31 per cent. in men, and from 2·77 to 4·14 in women.

8. In the departments which do not produce wine, but both cider and alcohol, the consumption of alcohol per head has increased in twenty years from 5 lit 50 to 8 lit. 50.

In these departments, the proportion of cases of insanity due to alcohol, already large in 1856, has doubled among the men, but has not sensibly increased among the women.

9. In those which produce neither wine nor spirit, but only cider, the consumption of alcohol, which was only 2 lit. 43 in 1847, is now 4 lit. 08.

It is in these departments that the proportion of cases of insanity due to alcoholism reaches the highest figure, particularly among the women.

It was already in 1855 16·44 per cent. among men, and 4·06 per cent. among women, and now it is 28·53 and 9·18 per cent.

10. In the departments which produce neither wine, cider, nor spirits, the consumption has increased from 1 lit. 49 to 2 lit. 69.

The proportion of cases of insanity due to alcoholism increased from 7·37 to 10·25.

11. In those which produce both wine and alcohol from wine, the consumption, which was 0 lit. 53 in 1849, is now only 1 lit per head.

The relative number of cases of insanity due to alcoholism has only increased from 7·63 to 11·40 ; the mental diseases following excesses in drink are there relatively rare among women.

12. In those which produce wine and spirits (d'industrie), the consumption of alcohol, already large in 1849, has almost doubled in twenty years.

The relative number of cases of insanity due to alcoholism, has

doubled among the men and had increased among the women in the proportion of 5 to 7 (2.55 to 3.43).

13. In the departments which produce wine, but do not manufacture alcohol, the annual consumption of alcohol has increased in twenty years from 1 lit. 75 to 3 lit. 92 per head in those which consume cider, and from 0 lit. 69 to 1 lit. 30 in the others.

In the former the cases of insanity due to alcoholism have increased among men in the proportion of 20 to 25, and in the latter from 6.90 to 16 per cent. Among women the increase in the two groups has only been from 2 to 2.60 per cent.

14. The consumption of alcohol and the relative number of cases of insanity due to alcoholism have then more particularly increased, other things being equal, in the departments which produce and consume cider.

15. In some departments, where relatively they drink much white wine and little spirits, as in Vendée, the cases of alcoholic insanity appear as common as in those in which alcohol is chiefly used; but in the former, contrary to what occurs in the others, the cases of alcoholic insanity are relatively very rare in women.

16. Alcoholic excesses act not only by causing attacks of delirium tremens or of insanity, but also by placing the parents, at the moment of conception, in very peculiar conditions, which have an evil influence upon the physical health of the children, and upon their intellectual and moral development.

17. The increase in the number of suicides has followed, everywhere in France, the enlarged consumption of alcoholic beverages.

18. The influence of the excesses in drinking, and specially of spirits, upon the production of mental diseases and of suicide, is not a fact peculiar to France; it has been observed in all countries, and particularly in those which consume most alcohol, such as the United States, England, Ireland, Sweden, Denmark, Russia, Germany, Holland, and Belgium.

2. *German Retrospect.*

On the Significance of Fat Granules and Fat Granule-cells in the Spinal Cord and Brain. By Prof. LUDWIG MEYER. With illustrations.

The granule-cells which Dr. Westphal found in the posterior and lateral columns of the cord in progressive general paralysis led that observer to the conclusion at once that in it consisted a universal lesion of the cord in the paralytic insane, as he had before proved of the grey degeneration of the posterior columns. Prof. Meyer, however, has not succeeded in detecting any connection between the discovery of granule-cells and a lesion of the cord to which these in-