Psychopathic Heredity, with Special Reference to Manic-depressive Psychosis [*Sull'-eredita psichopatica . . .*]. (*Rassegna di Studi Psichiatrici, vol. xxvi, p. 3, Jan.–Feb.*, 1937.) *Ormea, A.*

This paper shows the results of a wide study of the hereditary transmission of psychoses, with special reference to manic-depressive states, which are regarded as being usually a recessive character. The author shows many reasons why preventive sterilization will fail to eliminate manic-depressive states.

Thirty-five genealogical tables are presented. H. W. EDDISON.

Manic-depressive Symptoms in Identical Twins [*Manifestazioni discordanti di psichosi maniaco-depressiva in gemelli identiche*]. (*Riv. Sper. di Freniat., vol. lx, p. 521, Dec.*, 1936.) *Selzer, H.*

Two cases of manic-depressive psychosis in twin sisters, aged 33, are described. One suffered from exclusively manic, and the other from exclusively depressive symptoms. H. W. EDDISON.

The Delusion of Intermetamorphosis [*Le délire d'intermétamorphose*]. (*Ann. Méd. Psych., vol. xv, p. 19, Jan.*, 1937.) *Daumezon, G.*

Report on two female chronic paraphrenics, aged 52 and 73, demonstrating the illusion of intermetamorphosis. The variations of Capgras's syndrome are considered to depend upon the degree of dissociation. In the illusion of negative doubles this is least advanced. While in Courbon and Tasques' case, where metamorphosis is complete, there is an extreme degree of dissociation. The two cases here presented take a middle place in the series, and correspond most closely to Courbon's Frégoli illusion. STANLEY M. COLEMAN.

Psycho-anæmic Syndromes [*Les syndromes psycho-anæmiques*]. (*Ann. Med. Psych., vol. xv, p. 177, Feb.*, 1937.) *de Morsier, G.*

During the past ten years the author has studied 17 cases presenting neuro-anæmic syndromes. Sixteen of these were women between the ages of 40 and 60; only one was a man. The cases were classified as follows: paræsthesia without other symptoms (3); paræsthesia, subacute combined degeneration, no mental symptoms (4); paræsthesia and mild depression (2); paræsthesia, subacute combined degeneration, Korsakov's syndrome (3); optic neuritis and visual disturbance (2); chronic psychoses (3).

This paper is mainly concerned with the psychotic cases. In one of these the anæmia first showed itself at the age of 48. Two years later the patient showed evidence of medullary involvement associated with an hallucinatory episode. At the end of 4 years, the blood-picture, neurological and cerebral signs having markedly improved, she had a further hallucinatory psychosis and died a few months later.

The second woman first showed signs of pernicious anæmia at the age of 39 with spontaneous recovery in 2 months. There was a further anæmia 6 months later with recovery after 6 months. Two years later she had a mental illness lasting 9 months; at that time the blood-picture was normal. Having remained well for 8 years she again showed evidence of anæmia with mild psychotic symptoms. Two years after, the blood-picture was normal, but the psychotic state became much more acute and she died during the next year. Her psychosis is described as a periodic form of schizophrenia. The most striking feature of this second case is that the psychotic state did not coincide with the anæmia, and that improvement in the latter was associated with more acute mental symptoms. The third case is to be the subject of a subsequent paper.

The pathogenesis of pernicious anæmia and the neuro- and psycho-anæmic syndromes are still unknown. The heredity factor, and the achlorhydric, neurological and vitamin theories are critically reviewed. It is noted that neuro-pellagric and neuro-anæmic syndromes have such a close clinical resemblance as to suggest a common origin. STANLEY M. COLEMAN.