

*Dementia Paralytica in Natives of Java and Madura* [*Dementia paralytica bei den Eingeborenen von Java und Madura*]. (*Allg. Zeitschr. f. Psych.*, vol. *lxix*, No. 5.) van Brero. P. C. J.

Most authors who write on the subject are of opinion that dementia paralytica is seldom found in uncivilised races. In the asylum at Lawang (Java) from 1902 to 1909, 5·3 *per cent.* of the inmates were paralytics. The symptomatology is very like that found in Europeans. Delusions of grandeur, however, are not so forcibly expressed. The type of the disease is generally the classical one, the course short and rapid, death following about six months after admission in 23·5 *per cent.* The demented form is rare, and remissions are unknown. In the first stage there is often an impulse to incendiarism, which frequently leads to certification.

Alcohol and the harmful influences of civilisation are ætiological factors. As regards heredity and syphilis there are no certain data. Positive evidence of lues, however, was found in twenty-one cases out of thirty-three, and the same proportion of the patients showed stigmata of degeneration.

HAMILTON MARR.

*Cerebral Tumour and Korsakoff's Psychosis* [*Tumeur cérébrale et psychose de Korsakoff*]. (*Bull. Soc. Clin. Méd. Ment.*, May, 1912.) Bonnet.

This was a case of a gummatous growth originating in the brain-substance of the frontal region and involving both orbital lobes. The symptoms were in no way typical of frontal tumour, but were rather those of Korsakoff's psychosis—general mental reduction, amnesia of fixation, illusions, hallucinations, fabulation, muscular weakness and impaired gait. The knee-jerks, however, were exaggerated and the pupils contracted and unequal.

After three months' treatment the symptoms improved and the patient was taken out by her friends. Two months later she returned to the asylum with similar symptoms, but more marked loss of power in the lower limbs. She died a few days later as the result of a seizure. There was a history of alcoholism in addition to syphilis.

The brain of this patient was examined by Marchand and the findings are reported in the July number of the same journal. There was a diffuse meningitis present, the pia was adherent to the cortex, slight peri-vascular inflammation in both grey and white substance, the tangential fibres were degenerated and there were alterations in the cells. This bears out what is now generally taught—that in cases of cerebral tumours the mental symptoms are not so much due to the tumours themselves as to the diffuse lesions which accompany them.

W. STARKEY.

*Mental Troubles associated with Hæmorrhage into the Supra-renal* [*Hémorrhâgie surrénale traumatique et troubles mentaux*]. (*Bull. Soc. Clin. Méd. Ment.*, March, 1912.) Guiraud, M.

A male patient, æt. 40, had a severe fall on his back a week before admission to the asylum. He complained of violent pains in the right flank, radiating to back and front, vomited several times and had

diarrhoea. In hospital he became so excited and hallucinatory that he had to be sent to the asylum. On admission his state was grave; tongue parched, sordes on lips, voice faint, skin and mucous membranes pale, pain on pressure in the right flank, radial pulse imperceptible, femoral pulse weak. The "white line," the anæmic vaso-motor skin reflex, was present. The diagnosis of "acute supra-renal syndrome" probably resulting from traumatic hæmorrhage was made and confirmed at autopsy, when the right gland was found to be entirely destroyed by a hæmorrhage, and the left partially so. The author discusses the question whether the mental symptoms are to be attributed to the suppression of the function of the supra-renals, and if so, what the mechanism of production is. Are they due to auto-intoxication resulting from adrenal insufficiency, or more simply to be looked on as a result of the cerebral anæmia set up by the extreme reduction of arterial tension?

W. STARKEY.

*Kraepelin's Present Opinions on the Classification of Mental Diseases: the Group of Paraphrenias [L'opinion actuelle de Kraepelin sur la classification des états délirants: le groupe de Paraphrenies]. (Rev. de Psychiat., Oct., 1912.) Halberstadt.*

This article is a foreword to a work soon to be published by Kraepelin on the subject. The latter has often insisted on the immature condition of psychiatry, and this effort is intended to make good some present defects in classification. Paranoia, Kraepelin places by itself; he insists on the importance of predisposition, an exaggerated self-esteem in the first place leading later to megalomania and delusions of persecution. The remaining psychoses are due to endogenous or exogenous causes.

The former include dementia præcox, a new group Kraepelin proposes to call paraphrenias, manic-depressive insanity, and the senile and pre-senile psychoses.

Paraphrenias were formerly included under dementia præcox; indeed their principal characteristic is the absence in them of the psychological abnormalities peculiar to this affection. Kraepelin distinguishes four varieties. The first, or systematised form, is in the main identical with the chronic psychosis described by Magnan. Another occurs only in women, and consists in slight mental excitement associated with grandiose ideas; the excitement is continuous, and true dementia never supervenes. The third variety is similar to the preceding, but has, as its distinguishing feature, marked fabrication associated with disturbances of memory. Finally, there is a form which may turn out to be an aberrant type of dementia præcox. This is characterised by the prominence of absurd delusions and want of co-ordination in judgment: stereotypism, mannerisms, negativism, suggestibility, and impulsiveness are absent.

Exogenous causes of insanity are alcohol, cocaine, and syphilis; others act chiefly on predisposed individuals. Under the latter heading come imprisonment, deafness, "mental contagion," and law processes, with their baneful effects on a minority of those exposed to their influence. Dr. Halberstadt draws attention to the fact that Kraepelin's original method is preserved, the evolution of mental disease forming