bench and the bar. Of the total number of cases examined, 1.7% were found to be insane and 9.3% to be mentally defective. M. Hamblin Smith.

Alzheimer's Disease. (Amer. Journ. Psychiat., vol. 91, p. 485, Nov., 1934.) Roth-schild, D.

Five cases are reported, and the literature is reviewed. There is support for the view that the clinico-pathological picture is a somewhat heterogeneous group, with a different ætiology in individual cases. Although the possibility cannot be excluded that the disease may, in most instances, be caused by the factors operative in senile dementia, yet a close relationship between the two conditions is less frequent than has hitherto been supposed.

M. Hamblin Smith.

Emotional States of General Paresis. (Amer. Journ. Psychiat., vol. 91, p. 625, Nov., 1934.) Schube, P. G.

A study of 300 cases is given. It is urged that the general paretic is, usually, not merely a case of cerebral syphilis, but a case of cerebral syphilis plus a psychosis or psychoneurosis. Treatment should be directed not only to the cerebral syphilis, but also to the abnormal emotional state.

M. Hamblin Smith.

Dynamic Aspects of Cardiovascular Symptomatology. (Amer. Journ. Psychiat., vol. 91, p. 561, Nov., 1934.) Wolfe, T. P.

Of all psycho-somatic relationships, those bound up with the cardio-vascular system have remained closest to the threshold of consciousness. The affect most closely connected with the heart is anxiety. As anxiety may also produce cardiac symptoms, we are dealing with a vicious circle. It is possible that psychic factors may exert a fatal influence even in the case of a sound circulatory system; this may explain certain deaths under anæsthetics. It may be that hypertension may have a purely psychic origin, and that arterio-sclerosis may be the effect rather than the cause of hypertension. It is noted that muscular relaxation may be more than a symptomatic aid to psycho-therapy.

M. Hamblin Smith.

Physical Mental Relationships in Illness. (Amer. Journ. Psychiat., vol. 91, p. 541, Nov., 1934.) Dunbar, H. F.

We are emerging from a period of parallelism in medicine, and are becoming interested in problems of psycho-somatic interrelation. We are learning to distinguish mechanism and cause, and to bring each into a dynamic scheme. Among patients in whom the organic diagnosis is quickly made, the psychic component is often a complicating factor. In many instances the physical symptom represents the patient's last defence, and when it is taken away he is forced to relinquish completely his hold on reality. A complete picture from the organic angle and a complete picture from the psychic angle must be considered, not separately, but superimposed—that is, as a unity.

M. Hamblin Smith.

Neuroses Associated with the Gastro-Intestinal Tract. (Amer. Journ. Psychiat., vol. 91, p. 529, Nov., 1934.) Daniels, G. E.

It is a misnomer to think in terms of specific organ neuroses. But certain organs lend themselves particularly well to neurotic expression, and the gastro-intestinal system is often affected. Distinction may be drawn between narcissistic, transference neurotic, and physio- or actual neurotic reactions. For treatment purposes, it is most necessary to determine the narcissistic and transference elements.

M. Hamblin Smith.

The Anamnesis of the Toxic Goitre Patient. (Amer. Journ. Psychiat., vol. 91, p. 521, Nov., 1934.) Conrad, A.

The toxic goitre patient's emotional life is easy to study because of the instability of the control, especially of the autonomic functions. Emotional pathology