

(a) First he favoured the idea of establishing out-patient clinics for the early treatment of mental disease, these clinics to be established in connection with district mental hospitals.

(b) An out-patient department to be attached to the general hospitals in large centres where early cases of mental disease could be seen and treated.

(c) The establishment of separate dispensaries for poor patients in connection with the general medical Poor Law services in the large towns. It was stated that if more of the cases of "dementia præcox" were treated in out-patient clinics in the early stage of their disorders, many would be found to be curable.

Dr. FITZGERALD replied to the points discussed arising out of his paper.

A cordial vote of thanks was tendered to Dr. and Mrs. McCarthy for their hospitality in entertaining the Division, and regrets were expressed that so many of the members were unavoidably absent and were unable to dine with Dr. McCarthy in the evening at the Cork Club.

This closed the proceedings.

EDUCATIONAL NOTES.

Tavistock Clinic for Functional Nerve Cases, 51, Tavistock Square, W.C. 1.—A short course of lectures on Functional Nerve Disorder for Practitioners and Students will be given at the Tavistock Clinic beginning November 16, 1925
Syllabus:

The Psychological Factor in General Practice, by J. R. Rees, M.A., M.D.

The Endocrines and General Metabolism in the Psychoneuroses, by W. Langdon Brown, M.D., F.R.C.P.

The Theory and Causation of the Psychoneuroses, by H. Crichton-Miller, M.A., M.D.

Fee for the course: Medical Practitioners, £2 2s.; medical students, 10s. 6d. Tickets for the course to be obtained in advance from the Hon. Lecture Secretary at the Clinic. These lectures are not open to the general public.

The National Hospital for the Paralysed and Epileptic, Queen Square, Bloomsbury, W.C. 1. Telephone, Museum 7141.—Syllabus of Post-Graduate Course, October 5 to November 27, 1925.

(1) Out-Patient Clinics, Mondays, Tuesdays, Thursdays and Fridays, 2 p.m.; (2) Clinical Lectures and Demonstrations, Mondays, Tuesdays, Thursdays and Fridays, 3.30 p.m.; (3) Lectures on the Anatomy and Physiology of the Nervous System (if sufficient Applicants), Mondays, 12 noon; (4) Lectures on the Pathology of the Nervous System, Thursdays, 12 noon; (5) Clinical Demonstrations of Methods of Examination (if sufficient Applicants), Tuesdays and Fridays, 10 a.m.

The fee for the course, including Pathology Lectures, is £5 5s. For those who hold Perpetual Tickets the fee is £3 3s.

Dr. J. G. Greenfield will give Eight Lectures on the Pathology of the Nervous System on Thursdays, at 12 noon.

Dr. J. L. Birley will give Eight Lectures on the Anatomy and Physiology of the Nervous System, at 12 noon, on Mondays.

Dr. H. J. MacBride will give a course of eight Clinical Demonstrations, chiefly on Methods of Examination of the Nervous System, in the Wards at 10 a.m. on Tuesdays and Fridays, if sufficient entries are received. The fee for this course will be £2 2s. (commencing Tuesday, October 20).

Mr. Armour and Mr. Sargent operate at the Hospital on Tuesday and Friday mornings at 9 a.m., or at such other times as may be announced.

Any part of the course may be taken separately. Special arrangements will be made for those unable to take the whole course.

Fees should be paid to the Secretary of the Hospital at the Office on entering for the Course.

J. G. GREENFIELD,
Dean of Medical School.

A MENTAL BLIND SPOT.

By E. PICKWORTH FARROW, M.A., D.Sc.

AFTER working for about eighteen hours at the method of self-analysis which he developed, the writer suddenly remembered an occasion on which he had

frightened himself rather badly by gazing up at a pair of long and sharp mounted Highland cattle horns which used to hang over a certain doorway in the house in which he was born.

He had imagined at the time how terrible it would be to be tossed by an animal having such formidable structures as these, or for one of them to be run through his body. He was between 5 and 6 years old at the time of giving himself this fright, and had certainly not thought of the incident again since the age of 7, until it was remembered by the process of self-analysis, *i.e.*, not at all during an interval of 26 years.

He was away from home with his brother at the time of the analytical recollection, and he related the original incident to this relative, remarking, "I wonder where those horns are now?" Whereupon his brother replied, "Do you mean those Highland cattle horns which hang over the dining-room doorway in our present house?" The writer responded, "Are they there now? They surely cannot be for I should have seen them," to which his brother replied that he thought they must be the same.

Upon returning home the writer was more than surprised to find the same large horns hanging up in the position indicated, although he had not seen or noticed them consciously for over twenty years. This is all the more remarkable as they were by far the largest and most conspicuous objects exposed to his gaze each morning on coming downstairs—the staircase being exactly opposite the doorway. These facts were very surprising to the writer, and the phenomenon is undoubtedly a striking instance of a mental blind spot. In spite of the fact that the horns were by far the most conspicuous objects present his mind was apparently able to ignore their existence entirely, and he saw completely through them, as it were, to the wall-paper beyond, owing to having frightened himself with them in his childhood.

If many other people possess such pronounced blind areas, as they probably do, they would, of course, never become aware of the fact unless or until the repressed emotion formerly associated with the objects had been removed by an analytic process, or by some other method.

The phenomenon interested the writer as indicating that evidence in Law Courts, for example, that certain objects were not present on a certain occasion, is not necessarily reliable. Probably evidence that certain objects were present under certain circumstances is, on the whole, far more reliable than evidence to the effect that they were not present.

The writer would much like to discover why he was so badly frightened by the horns in the first instance. The fear that he might be tossed by similar horns is not an adequate explanation, for it does not explain the underlying origin of this fear. He has found it, however, very difficult indeed to find out the actual underlying origin of such a fear as this. Still, it should be possible ultimately to discover its underlying origin by continued work at the method of free-association.

A detailed account of the method of self-analysis employed by the writer is about to be published elsewhere.⁽¹⁾ Several accounts of incidents from his early childhood recollected by it have already been published.^(2, 3) It will be noted that the results obtained by this method of self-analysis are not open to the general criticism that the analyst reads the results into the mind of his external patient. Processes of self-analysis, and the results obtained by them, should thus be particularly interesting to cautious and careful persons, even if they may not be so striking as some of the results obtained with analysts.

SCOTTISH ASYLUMS' PATHOLOGICAL SCHEME.

Twenty-eighth Annual Report of the Board For the Year 1924.

[ABSTRACT.]

In this Report it is stated that arrangements were completed during the year with Edinburgh University authorities approving of the new Superintendent of the Laboratory being recognized as Lecturer in Neuropathology. From the

⁽¹⁾ See a forthcoming issue of *The British Journal of Medical Psychology*.—⁽²⁾ See the *International Journal of Psycho-Analysis*, January, 1925.—⁽³⁾ *The Medical Press*, April 29, 1925.