

A long-distance plan is advisable in the upbringing of any child, but it is particularly in the case of 'problem' children that this becomes an absolute essential; and in this experiment this factor has been strongly stressed and kept in view by all *personnel* dealing with the children. While this experiment is undoubtedly most praiseworthy, it is extremely doubtful if it can be considered a practical solution to the problem with which it deals, owing to the large expense involved. Certainly in this country no local authority is likely to consider seriously "a graded school and playgrounds under psychiatric supervision, with a *personnel* including specially trained teachers, nurses, occupational therapists and social workers" attached to "a hospital for mental diseases with a special building for children in its own grounds."

The book well merits the careful study of all those concerned with children presenting conduct disorders. P. K. McCOWAN.

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*Alcohol and the Other Germ Poisons.* By G. P. FRETTS. The Hague: Martinus Nijhoff, 1931. Med. 8vo. Pp. 179. Price, cloth, 7.50 gld.

In this small volume Fretts sets out a vast array of information of a clinical and statistical nature about alcohol and its effect on the germ-plasm, both human and animal. His conclusions are what one would expect—that much more information of a reliable nature is required. So much information is obviously prepared by biased individuals that its statistical value is *nil*. At the same time we are, as the author wisely stresses, very short of statistics on healthy persons to compare with those on alcoholics.

From the experimental point of view the author produces sound evidence that injury to the germ is brought about by alcohol. At the same time he points out that the knowledge derived from the influence of alcohol on man and the experiments on animals has not taught us anything about the heredity of acquired characteristics.

Although there is such a collection of material from all available sources, one is disappointed that the author has no statistical evidence to convince us, one way or the other. There is an excellent bibliography. G. W. T. H. FLEMING.

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*Les Délirants.* By R. MALLET. Paris: Gaston Doin et Cie, 1930. 8vo. Pp. 106. Price 12 fcs.

For a long time it has been usual to discuss the ætiology of delusions chiefly from the psychological point of view. It is, of course, a well-established fact that the delusions which occur in acute delirious states are of toxic origin. But in such cases the delusions are fleeting in character and are accompanied by more or less clouding of consciousness, whereas in chronic systematized

delusional and chronic hallucinatory psychoses there may be no intellectual impairment. In this book Dr. Mallet outlines a theory which tends to show that a delusion, whether it be transitory or permanent, is a mental reaction to an organic process.

Up to a certain point there is, as the author contends, a resemblance between obsessions and delusions. Thus, in both there is an irreducible idea, endowed with a strong emotional tone, which forms the starting-point of a whole system of associative activity (automatism), the latter being in direct conflict with volition. Here, however, the resemblance ceases. In the case of obsessions the critical and controlling faculties are not lost: the patient is aware of his morbid state. His will, powerless against the automatic phenomena, is, nevertheless, sufficient to enable him to preserve a normal demeanour. On the other hand, in delusional cases the idea has become accepted by the patient. It is no longer criticized. Moreover, the ability to control his conduct become modified, so that he acts according to the dictates of his delusion.

An hallucination is but a stage further in the evolution of a delusion. The irreducible element in this case is treated by the patient as something foreign to his ego, and is projected on to other persons. The personality is split up into two parts: on the one side is a progressive systematization of ideas with a corresponding deviation of the controlling faculties; on the other side there is a certain residuum of control, which enables the patient to preserve a normal bearing towards everything which does not concern his delusions.

The author upholds the views of de Clérambault, who made a special study of the physical factor in the causation of chronic hallucinatory psychosis. De Clérambault believed that the symptoms of that disease were the delayed sequelæ of infection, intoxication or traumatism. The prolonged latent period between the infection and the development of the psychosis would, he says, account for the insidious onset and the progressive systematization of the delusions. The toxins, according to De Clérambault, exercise a selective action on the projection fibres and nerve-tracts rather than on the cell-bodies. This, he considers, would explain the peculiar foreign or "ready-made" character of various phenomena of automatic action and speech, as well as the inexpressible strangeness of certain hallucinations, because the normal stages of perception are absent in their case.

It must be admitted that in chronic delusional cases the onset of the mental symptoms is just as subtle and insidious as in the chronic hallucinatory types; and, moreover, the irreducible element is endowed with the same automatic activity. The author, therefore, affirms that it is reasonable to suppose that the same ætiological factors are at work in both cases. His conclusions may be thus summarized: The automatic phenomena which constitute the foundation of obsessions, delusions and hallucinations become liberated as a result of the effects of some toxic process possessing a selective action on the association nerve-fibres. In

those cases which develop slowly this liberation leads eventually to dissociation.

Dr. Mallet believes that toxæmias and infections affecting the ancestors may account for the appearance of obsessions in the descendants. In such cases, he says, everyday worries are sufficient to precipitate the condition.

Dr. Mallet's little book will be found an interesting contribution to the study of delusional states. NORMAN R. PHILLIPS.

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*Mental Aspects of Stammering.* By C. S. BLUEMEL. London: Baillière, Tindall & Cox, 1930. Crown 8vo. Pp. x + 152. Price 11s. 6d.

Bluemel elaborates a method of treating stammering, in the light of a theory first presented by him in 1913. This theory is to the effect that stammering is not so much an impediment of speech as an impediment of thought: that it is the direct result of a "transient auditory amnesia," of a direct break in the continuity of consciousness, something like the sudden "blank-out" in a film when the light-source fails momentarily.

To speak fluently one must have a clear mental image, and this has an auditory component and a "motor" component: there is an image of the sound of the word, and an image of the feeling of the word at the lips, tongue and throat. Bluemel contends that stammering results where the sound image is lost while the feeling image is retained; that it is due to a failure of the sound image, and therefore to a "transient auditory amnesia." The author makes no attempt to explain why we should get this "transient auditory amnesia." He does point out, however, that "underlying this disturbance of thought is of course a neurotic temperament." He admits that emotional shock and fright do disturb the continuity of consciousness, and incidentally the mental mechanisms of speech. He lists a number of situations that increase or decrease the tendency to stammer, all of which are situations that obviously increase or decrease anxiety; and in discussing therapy he lays stress on the fact that "when the stammerer keeps his emotion tranquil he has less difficulty in keeping his visual and verbal thought in order." Here Bluemel seems to beg the entire question. It seems reasonable to assume, as psychiatrists generally do, that the disturbance is primarily an emotional one; and whether the secondary effects include a "transient auditory amnesia" as Bluemel suggests, or "weak powers of visualization" as Swift suggests, is surely a matter of secondary importance. There is no real evidence for or against one or the other, and from the therapeutic view-point neither conception is really helpful.

The section on therapy devotes special chapters to the treatment of kindergarten children, middle-grade children and high-school students or adults; there are also chapters for the parent, and for the adult who is attempting to cure himself.