

the difficulty of explaining mental processes by physical changes is not yet got over. Plato, he tells us, compared memory to a cage full of birds; the bird we hold in the hand is the thing we remember at the time; the others we can get at some way. Gassendi likened memory to a cloth which had been folded and which readily takes again the same folds. But then, with Plato's illustration, we have the person who sees and holds the birds, and the cloth does not recognise its own folds. Memory may be accompanied by changes in the brain, but we have to explain how these changes recognise themselves or are recognised.

WILLIAM W. IRELAND.

---

*Sammlung Kleiner Schriften zur Neurosenlehre.* Second series. By Professor SIGMUND FREUD. Leipzig and Vienna: Deuticke, 1909. Pp. 206, 8vo.

In this second series of essays bearing on his doctrine of the nature of hysteria and other allied neuroses, the well-known Viennese professor has included much of a more specialised character than marked the first volume. Half the book is occupied by the long, elaborate, and highly characteristic "Fragment of Analysis of a Case of Hysteria," which has already received mention in the "Epitome" of the Journal. Among the studies included in the volume are a discussion of the hysterical fit in its possible sexual relationships, a paper on the sexual enlightenment of children, an exposition of the chief sexual theories spontaneously evolved by children, a suggestive though debatable essay on so-called "civilised" sexual morality in relation to modern neurotic conditions, and some speculations on day-dreaming as related to the poetic imagination.

The author displays his usual charm of exposition, and is throughout subtle, out-spoken, and convinced, if not always convincing. Many readers will not fail to find themselves opposed, even violently opposed, to some of his methods, and to not a few of his opinions and conclusions. But a collection of bald platitudes is not always the most helpful and stimulating reading. In any case, those who seek such reading must not interest themselves in the efforts of the pioneers who are attempting to penetrate unexplored fields of neuro-psychology. Among these pioneers Freud is one of the acknowledged leaders.

HAVELOCK ELLIS.

---

### Part III.—Epitome.

#### Progress of Psychiatry in 1908.

AMERICA.

By W. McDONALD, Jun.

To discern ever a forward movement in the confused activity of so new and intricate a branch of science there is need of hopefulness and faith as well as accurate insight. One must be a confirmed optimist,

for there are moments when a narrow and one-sided view might lead to the conclusion that the signs of the times point backward to promise unfulfilled.

Regard, for example, the present status of that much advertised departure in psychotherapy of which so much was heard a year ago. Beginning with the "Experiment in Practical Religion" under the inspiration and directorship of Dr. Worcester and his associate Dr. McComb at the Emmanuel Church of Boston, the movement quickly received the support of many of Boston's leading physicians, and, under this impetus, spread like wildfire. Widely heralded by newspapers and magazines it aroused the attention of the whole country. The unfortunate outcome predicted by a few may already be seen by the many. The writer has been informed that Dr. Worcester is himself shocked and grieved at the unlicensed and utterly foolish proceedings carried on under the name applied to the work begun at Emmanuel Church.

There is no mistaking the harm done, for it may be noted daily by the practising neurologist and psychiatrist. Patients everywhere now prate of *suggestion*, *auto-suggestion*, and *hypnoidal* methods of cure. They come with the words *mental synthesis*, *sub-consciousness*, and *submerged ideas* upon their lips, wondering that the physician, through the conjuring with such names and the laying on of hands, is unwilling to promise cure from all forms of bodily and mental ill. As might have been expected, charlatans have reaped a rich harvest from the child-like faith of that multitude of sufferers ever ready to seize upon any new and mysterious method of treatment.

Injury has come, however, not alone from the quacks, but from well-meaning men and women. The seductive *laying on of hands* which has attracted the suggestible and over-sentimental of every age and country, that gentle stroking of foreheads, the molly-coddling in quiet, darkened rooms, the cant of pseudo-science—these means and methods at the hands of the ill-advised have been used with disastrous results.

Perhaps the greatest damage has been done to those patients whose minds, already directed in morbid grooves, were subjected to treatment which only served to fix the attention more firmly on the phobias, the obsessions, the unhealthy notions and emotions. An example from personal experience will illustrate this class of victims.

An unusually intelligent girl of twenty, exhausted in mind and body from a long unbroken chain of pernicious experiences, was sent for treatment to one of the prominent exponents of Dr. Worcester's theories. Instead of tactfully diverting the attention, nursing the patient, prescribing baths, rest, occupation, fresh air, sunshine, or other common-sense treatment appropriate to the restoration of a tired brain and nervous system, she was required to report for treatment in a darkened room where, according to the testimony of the patient herself, the religious healer gently stroked her forehead, explaining to her the nature of the obsessions with which she was being tormented, and bidding her to repeat to herself, "I am going to get well, I know I can get well." It would seem that the mental effort required for the pursuance of the pastoral psycho-therapeutics merely intensified the exhaustion; for at this writing she is in a hospital in a state of stuporous retarda-

tion, reiterating slowly, "He told me to say to myself 'I am going to get well,' but I know I can never get well again." She will probably recover in time, but had the gravity of her condition been recognised and properly treated it is not unlikely that the simple psychasthenic condition would never have progressed to the serious psychosis with which she is now afflicted.

Association tests have been much in vogue in America of late, especially the method of psycho-analysis of Freud. Apparently they are being employed in some form—at least in selected cases—in the majority of psychiatric hospitals. The published reports commonly mention the results of these tests as though they formed a part of routine examination for various types of mental disorder.

Inasmuch as anything which adds to the thoroughness of examination should be welcome, it is, perhaps, unwise to criticise this innovation. No matter how inadequate the tests may be in fulfilling the purpose for which they were designed they must necessarily give much general information concerning the character of the mental disorder and of the speed, facility and type of ideation. And yet it is to be regretted that so much of the energy expended in investigations of this sort is being misdirected. The wave of popularised psychology and psychiatry which has been sweeping over the country of late and which has found expression in so many lay publications has not only stimulated the curiosity of the public at large, but has also apparently reacted on certain men of science, tempting them to forsake the sober paths of plodding endeavour for the quest of the dramatic. It is scarcely believable that in the response to a series of test words anyone should expect to find the underlying cause of a mental disorder or that in the resurrection of a forgotten idea or hidden emotion the etiology of a mental disease could be revealed. It is the old fallacy of placing the cart before the horse. No matter how large a part the sexual instincts, sentiments and ideas may play in normal and abnormal thought, no matter how essential may be the other instincts which have become perverted in the progress of disease, it is illogical to expect to find the source of the disease in the mental content itself. So far as association tests lead to the study of the past experience of the subject in relation to the inherited mental constitution and acquired disposition great benefit may be derived from them but, considered alone, they are of little value.

Criticisms, such as the above, may only serve to strengthen an opinion already perhaps too well established in British minds concerning the radical and often misdirected enthusiasm of American workers. Nevertheless, it should not be forgotten that in America at all times a steady, sober work is being carried on toward the furtherance of all that is worth while in psychiatry. We are getting away from the old stereotyped and dogmatic ways of dealing with patients. Theory is giving way to practical aims. While there are—and will always be—men who follow blindly any leader who happens to bring forth anything new there are many others who, regarding the vineyard broadly, have gone forth to the work with willing hands and judicial minds. While they appreciate the good in such theories as those of Kraepelin and Freud and are ready to take advantage of any far-reaching psycho-therapeutic

movement, such as that originating at the Emmanuel Church of Boston, they are still capable of productive independent effort. Perhaps the most significant feature of the progress in America is the establishment of psychiatric clinics in connection with medical schools, where young men preparing for the practice of medicine may receive really scientific instruction as to mental disease and its treatment. In addition to the clinics at Ann Arbor, Boston, and Toronto, we are now to have yet another at Baltimore in connection with Johns Hopkins Hospital. On the 12th day of June, 1908, Mr. Henry Phipps offered to that hospital the funds necessary for the erection and equipment of a psychiatric hospital. He also arranged to provide for the maintenance of the hospital and of a professorship for a period of ten years from the time of the opening of the hospital. This offer was accepted by the trustees of the Johns Hopkins Hospital on July 17th, and it was further resolved that the donor be requested to allow the new psychiatric clinic to bear his name in perpetuity as one of the departments of the Johns Hopkins Hospital.

The trustees of the University also united in appointing Dr. Adolf Meyer, Director of the Pathological Institute of the State Hospital of New York, to the position of Director of the Clinic and Professor of Psychiatry in the Johns Hopkins Medical School. Dr. Meyer has accepted the Professorship of Psychiatry and the Directorship of the Clinic. No one better fitted could have been selected, and the success of the enterprise has thus been assured. Dr. Meyer writes me that the plans are nearly finished for a hospital of about eighty patients with adequate laboratory facilities.

Much might be said in regard to the after-care work which is being carried on in intelligent and practical ways in a number of States, notably in Massachusetts. A new departure along these lines has recently been instituted in a rather remarkable way.

Mr. Clifford Beers, a recovered patient, in the book recently published—*A Mind that Found Itself*—suggested the creation of a national society having for its objects the study, prophylaxis, and treatment of mental disease. The society has already been formed under the name of "The Society for Mental Hygiene in Connecticut." Though it is still somewhat early to form a positive opinion as to the benefits to be derived from this departure, it may be said that the movement promises fair to carry the work of the hospitals beyond their present confines, and to put the leadership and the necessary outside work into the hands of competent collaborators.

Dr. Stoddart's *Mind and its Disorders* will create an excellent impression upon American alienists and doubtless have a large sale in this country. It is the kind of book by a British author for which we have been looking for some time, a happy compromise between the conservatism of Great Britain and that attitude of acceptivity, especially, perhaps, towards wares "made in Germany," which has characterised American psychiatry in recent years. The difference is well illustrated in the literatures of the respective English-speaking countries, but Dr. Stoddart's book is distinctly a *rapprochement*. His point of view is generally sound, and he is strong and hopeful on treatment. And it is evident that while the author is what we should call up-to-date and

possesses an open mind, he is not too suggestible as to the German label. It may be that we need in America first the kind of connective which Dr. Stoddart has furnished. Anyhow, he has written a good book.

---

FRANCE.

By Dr. RENÉ SEMELAIGNE.

ACCORDING to an old saying a medicament must only be used whilst it possesses a curative power. Likewise, medical terms should only be employed when they seem to define a pathological state. Some years ago, degeneration and chronic delirium were all the fashion; now dementia præcox and manic-depressive insanity are, without any hesitation, the most frequently diagnosed. Indeed, it is an easy matter to declare that a patient is a degenerate or a case of dementia præcox, though such terms are not sufficiently precise, and might be applied to various forms of insanity. The idea of manic-depressive insanity is not a new one, and originated, not only previous to Kraepelin, but even to Falret and Baillarger. Scipion Pinel, a son of the illustrious alienist, had noticed that insanity, which he called *cerebrie*, very often exhibited successive appearances of mania and melancholia, also intervals of apparent lucidity, which might allow of the patients temporarily resuming their habitual duties. In the *Physiologie de l'Homme Aliéné*, published in 1833, the same author proclaims that it is no longer correct to consider mania, melancholia and dementia as three different diseases, but that they are only different phases of the same disease, sometimes of very long duration.

Another saying asserts that plenty of good things cannot be hurtful to anyone. If such a saying is true mental science has been greatly favoured in France during the past year. Two new societies have been established for the unique and laudable purpose of assisting their ancient sister, the *Société Médico-Psychologique*, aged fifty-seven years. But why two societies, seeing that they have the same purpose? Some evil-minded people would, perhaps, pretend that it is merely a personal question, and that two societies mean two councils and a double number of officers; but everybody, of a truth, knows that ambitious delirium does not exist amongst the followers of mental science, and that though the old Latin saying, *invidia medicorum pessima*, was perhaps true of some centuries ago, it is now quite inapplicable. Notwithstanding that, two societies have been founded almost at the same time. Scientific discussions in the *Société Médico-Psychologique* are more generally theoretical; but at the meetings of the new societies members must present patients, and the cases are immediately discussed. For such purposes the meetings take place in the *Asile St. Anne*. But though the scientific purpose is quite the same, the constitution of the societies is entirely different. The *Société de Psychiatrie*, which is slightly the older, includes only thirty-five titular members, besides which there are honorary, national corresponding, foreign corresponding, and *associé libre* members. No one can be elected as titular, national corres-