

quite separate; according to Freud the herd instinct is only a special differentiation of the sex instinct. Social tendencies differ from sexual tendencies by the absence of the sensual element, and by greater permanence, identification and diffusion. All these factors make social relations between members of the same sex easier than between members of the opposite sex. The greater development of male homosociality Flügel considers to be due (i) to the anti-social influence of the greater narcissism of women (ii), to the fact that women are more monogamously inclined and have more to gain by marriage, (iii) to the fewer facilities for social relationships afforded by women's work, and (iv) to the seclusion of women.

The recent increased social life of women is taking a heterosocial form and so tending to increase the heterosociality of men. Interests of the family to some extent oppose the development of social sentiments, but at the present day the influence of the family is waning. Romantic love aids the formation of social sentiments, for it demands some degree of aim inhibition, a limitation of egoism and narcissism, increased sublimation, and an overflow of love to others.

G. W. T. H. FLEMING.

*Shyness. (Fourn. of Neur. and Psycho-path., October, 1927.)
Hampton, F. A.*

Dr. Hampton suggests, with Prof. McDougall, a likeness between schizophrenia and shyness, which may be sufficiently close to cause difficulty in diagnosis.

He further discusses conflict and the inferiority complex in relation to shyness, and the mechanism of its phenomena. He finds that on occasion shyness has its advantages. It often appears on investigation to be the involuntary expression of a repressed tendency to self-assertion.

He believes that the most satisfactory method of treatment "is to help the patient to a knowledge of the source of his feeling of inferiority, and when this is fully disclosed it will seldom be found that he is unable to deal with it effectively."

WM. McWILLIAM.

*The Functional Psychoses as an Evolution of Psychic Impotency.
(Fourn. of Nerv. and Ment. Dis., August, 1927.) Cassity, F. H.*

The authors divide the psychically impotent into four groups, based on Rank's sequences of sexual development. Group I contains those traumatized at weaning, and includes (a) those who, through compensatory substitution, become either latent or active homosexuals as a result of the trauma, and (b) those who remain sexually at nursing level. Group II contains those individuals fixated to pre-adolescent love objects in a latently incestuous manner. Group III contains those individuals sexually traumatized through innocent pre-adolescent sexual indulgences of incestuous nature. Group IV contains those whose love energies are dissipated in avenging imagined parental desertion or neglect,

(a) as a result of the death of a parent of the opposite sex, (b) due to jealousy of parent of the opposite sex (Rank mechanism).

G. W. T. H. FLEMING.

The Fantasy of not belonging to one's Family. (*Arch. of Neur. and Psychiat.*, December, 1927.) Lehrman, P. R.

Lehrman makes four divisions of this fantasy: The fantasy of illegitimacy of (a) one's self, (b) one's sister or brother, (c) one's offspring, the fantasy of having been adopted, the fantasy of royal lineage, and the fantasy of savage lineage. Apart from the delusions of fantasy, the feeling of "not belonging" occurs in many types of neurotic actions. Lehrman sees in the changing of names an unconscious motive. The fantasy of not belonging to the family is one of the expressions of the œdipus complex. In abjuring one's relationship to the family, one inverts the wish to remove the rival parent, and at the same time it clears the way for the sexual striving for the opposite parent by eliminating the dread of incest.

G. W. T. H. FLEMING.

3. Clinical Psychiatry.

Zur Frage der sog. Menstruationspsychosen [Concerning so-called Menstruation-psychoses]. (*Psych.-Neurol. Wochens.*, December 24, 1927, No. 52.) Prengowski, P.

This paper contains descriptions of 10 cases of menstrual psychoses which can be differentiated into two sharply separated groups. The first 7 cases showed a diminution of the menstrual flow accompanied by psychic excitation, etc. Agomensin was the remedy in these cases. Cases 8-10 showed the opposite clinical picture—excessive menstruation with stupor yielding to sistomensin treatment.

A. WOHLGEMUTH.

A Case of Juvenile General Paralysis. (*Irish Journ. of Med. Sci.*, February, 1928.) Rutherford, H. R. C.

The author reports a case of general paralysis in a boy, "aged almost 10 years." Mental and physical states are briefly noted, but the history is dealt with in greater detail.

WM. MCWILLIAM.

The Sequelæ of Encephalitis Lethargica. (*Brit. Journ. of Med. Psychol.*, July, 1927.) Shrubsall, F. C.

The author draws his material from the London area, where in the seven years ending 1925 there were 1,325 cases notified, with a death-rate of 37%, serious incapacity in 22%, and apparently complete recovery in 28%. He briefly summarizes the physical symptoms before considering the mental changes. In children, intellect is affected varying from hebetude to imbecility. In testing the intelligence of these children, the result is somewhat improved if more time is allowed. In adults the results have varied. Some have been able to pass degree examinations, notwithstanding great