

as shown by the pronounced self-complacency of the Englishman, both individual and national. (Many symptoms of anal eroticism are also noted in this connection, even apart from "the immense luxury of the English closet.") Suppressed libido turned in on the ego is also to be traced in the Englishman's extreme care of the person and attention to dressing. So also with English love of animals. "Domestic pets are in England the lightning-conductors of libido."

An advantageous result of the kind of suppression that prevails in England is that by placing women on a lofty pedestal and making love difficult it spurs men to great achievements, arousing ambition and the impulse to produce one's best. In Germany it is impossible, even in a dream, to imagine a social democrat becoming a cabinet minister, or a man of science like Darwin finding his grave among national heroes.

There is evidently a rich field for the psycho-analyst in London. But Maeder is careful to point out in conclusion that he does not wish to make out that the Englishman is neurotic. He regards him as a gigantically capable person who has not suffered unduly from the suppression to which he has been subjected. HAVELOCK ELLIS.

Emotional Dream-state. (*Journ. Nerv. and Ment. Dis.*, June, 1912.)
Powers, W. J. S.

It is held by many that "emotional dream-state" always depends to a large extent on pre-existing conditions of the organism, and that the traumatic shock of sudden emotion will not always suffice to produce it. This is questioned by Powers, who illustrates his argument by four cases which he observed, under Ziehen, at the Psychiatric Department of the Charité Hospital in Berlin. Of these the most decisive, and, indeed, the most exceptional, is the first case.

The patient was a man, æt. 30, married, with five healthy children, robust, well-developed, normal (except for slight strabismus), good heredity, always healthy, very moderate in alcohol and tobacco, of quiet, retiring nature, not easily excited, but very energetic, a hard worker and absolutely trustworthy. He worked an electric crane in a foundry. The day before admission he was working the crane as usual when the machine suddenly stopped. He at once shut off power. Stepping back to view the machinery he saw the body of a man jammed between the crane and a beam. He screamed, and after that was unconscious of anything that happened. His foreman stated that he seemed about to leap down from his elevated position; he was brought down with some difficulty, sobbing bitterly and trembling so violently that he could scarcely walk. He lay down for an hour, weeping and muttering incoherently, and was then taken to the hospital in an ambulance. On admission he was able to walk with support, but had no ideas of place, time and persons. A fine static and motor tremor was noticed; knee reflexes symmetrically exaggerated, patellar clonus, excessive sensitiveness to the lightest prick of a pin-point. He lay quietly in bed muttering, and with spells of violent weeping, breathing slowly and deeply. Ten hours later his wife visited him, and for the first time he showed conscious interest, recognised her, and told her that he had constantly before his eyes the man's body jammed between

the crane and the beam. An hour later he was again unable to recognise his surroundings. He was transferred to the Psychiatric Department, and in the morning was able to ask questions, and except for nervous restlessness seemed normal. He was able to recall his wife's visit, but the ten hours before her visit and the twelve hours after remained permanently a blank to him. He still had always before his eyes the vision of the man's jammed body, but though advised to stay longer in hospital he insisted on returning home. In a few days he returned to work, the restlessness decreased, and the vision became less persistent and distressing. At his own wish he resumed working the crane. The condition is regarded as dream-state due to emotional shock. There was not the slightest indication of hysteria or epilepsy, and the patient had been in the habit of drinking only a pint of beer daily; the commonest predisposing causes of emotional shock were thus eliminated. Similar cases were observed by Stierlin during the earthquake at Messina. In these emotional shock resembles severe mechanical shock. In all probability the emotional dream-state is brought about by vaso-motor disturbance.

HAVELOCK ELLIS.

Two Psycho-analytic Theories [*Zwei psychoanalytische Theorien*]. (Zt. 1. *Psychother.*, Bd. iv, Heft. 2, 1912.) Wexberg.

Freud's psycho-analytic doctrines are now generally known in their main outlines, and they have adherents all over the world. It was inevitable that among the Viennese master's able and vigorous disciples some should eventually develop along individual lines and reach entirely independent standpoints of their own. This process has most notably occurred in the case of Dr. Alfred Adler, the author of a recent remarkable book, *Ueber den Nervösen Charakter*, and founder, in 1911, of the Union for Free Psycho-analytic Investigation, which is preparing to issue a lengthy series of publications. This society has been formally declared to be heterodox by the Freudian Psycho-analytic Society, which forbids its members to belong to both societies.

Wexberg, who himself belongs to Adler's school, here describes the two psycho-analytic theories, with the object of bringing out clearly the distinctive character of Adler's position.

This position is, on the whole, so distinct that Adler might dispense altogether with Freud's theories, although not with his method. Adler starts with the conception of defective or inadequately developed organisms. It is on the organic basis of such *Minderwertigkeit*, he holds, that a neurosis is built up. Freud, on the other hand, may be said, on the organic side, to start with the assumption of erogenous zones with an infantile irritability. It may be, however, Wexberg suggests, that this opposition can be bridged over if we suppose that the functionally inadequate organs furnish the ground on which the irritable erogenous zones develop. But in any case this conception of organic *Minderwertigkeit* must be firmly held in mind, for it is the basis of Adler's theory. It is because the subject feels that his organically defective organ must be fortified that he is apt to lay upon it an undue emotional stress, and so constructs a fiction which may develop into a morbid state.