

He discusses the close relationship between migraine and epilepsy, which may be different manifestations of the same underlying disturbance, although migraine does not lead to progressive deterioration. Although migraine is frequently combined with hysteria and other psycho-neuroses and these react on each other, the author does not consider it a hysteric manifestation. Ætiology and therapy are not discussed, but the author alludes to the importance of heredity, and states that among 1,000 cases only one showed definite endocrine disturbance, although menstrual disturbance was common.

MARJORIE E. FRANKLIN.

*Affective Disorders following Acute Epidemic Encephalitis in Children.* (Amer. Journ. of Psychiat., April, 1924.) Rhein, J. H. W., and Ebaugh, F. A.

The authors draw attention to the not infrequent occurrence of apparently unmotivated suicidal attempts in post-encephalitic children during transient depressions which, unlike those of manic-depressive psychosis, are usually unaccompanied by inhibition of thought or ideas of self-reproach. Manic reaction with increased psycho-motor activity also occurs. The psychic changes may be related to the previous make-up of the child. Behaviour disorders sometimes lead to asocial acts and medico-legal difficulties. The authors emphasize the need for safeguarding children while suffering from affective disorders as sequelæ to epidemic encephalitis, and the value of "rest cure" in treatment. Case reports are given.

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*An Analysis of Recoverable "Dementia Præcox" Reactions.* (Amer. Journ. of Psychiat., April, 1924.) Strecker, E. A., and Willey, G. F.

The object of the study was to uncover factors which might have modified prognosis in cases thought to be of malignant type but ultimately recovered; and conversely, to elucidate those factors which give to a benign psychosis a malignant colouring. The 25 cases reviewed were diagnosed as dementia præcox by majority vote at staff conferences at the Pennsylvania Hospital, Department for Mental and Nervous Diseases. Many showed symptomatology of classical type, while some seemed more debatable, but opinions differ as to whether ultimate recovery invalidates a diagnosis of dementia præcox and prognosis rather than diagnosis is stressed in the paper. Of 1,000 consecutive admissions 187 were classified as dementia præcox, and of these 25 recovered. The criterion of recovery was "apparently permanent and complete restoration to normality"—cases with previous or subsequent attacks or of partial readjustment were excluded. The period since recovery was from 7 months to 8 years, with an average of 5 years, and the duration of the psychosis from one month to 5 years, with an average of 11.5 months. Consideration was confined to manifest symptoms, personality, family and personal history, situation, etc., and "interpretations which involved a probing of the unconscious