

### Part III.—Epitome.

#### Progress of Psychiatry during 1914.

##### AMERICA.

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From the advance that is taking place in so many directions these days a few trends attract attention by their comparative newness. Diagnostic tests such as the Wassermann, the Noguchi, the luetin, the colloidal gold colour reaction of Lange, and the cellular analysis of the cerebro-spinal fluid are now being applied far and wide.

The value of these tests will soon be determined. Already it is almost universally admitted that, although a positive response to such tests on the blood serum is, with few exceptions, a reliable indication of syphilitic disease, a negative response is untrustworthy where there is a question of possible syphilitic involvement of the nervous system. Routine examination of the cerebro-spinal fluid, whenever there is suspicion of syphilis of the nervous system, is now made in a large number of hospitals.

The reports of these analyses favour the belief that an absolutely normal fluid generally signifies escape of brain and spinal cord from syphilitic injury, though a number of observers have found pupillary involvement with a normal spinal fluid in subjects who gave a clear history of syphilitic infection, and bore unquestionable syphilitic scars. The spinal fluid may be normal while the blood serum reacts positively. Morbid increase of cellular elements in the cerebro-spinal fluid is seldom lacking in cerebro-spinal syphilis, unless anti-syphilitic remedies have been used diligently, but this increase of cells may be found in many conditions other than syphilis.

It is a daily experience to find cerebro-spinal fluids which react positively to some and negatively to other tests, and occasionally two observers simultaneously testing one fluid find contradictory responses to one form of test used by both examiners.

Lange's colloidal gold test, judging from the reports, is, of all the tests upon cerebro-spinal fluid, the most delicate. When the other tests are positive, the gold test in reliable hands is seldom negative, and it may alone give accurate evidence of syphilis when all other tests are negative, but unfortunately it not infrequently responds positively when all other tests are negative, and when all other evidence is against the assumption of syphilitic infection.

The results of treatment of general paresis, tabes, and cerebro-spinal syphilis with salvarsan, neosalvarsan, and with intra-spinal injections of salvarsanised serum, are being watched with great interest. Reports of these treatments are coming from all parts of the country. As yet opinions are contradictory. Many observers are enthusiastic over the results of their intra-spinal treatment, while others using the same methods are pessimistic concerning their usefulness. There is also much difference of opinion, even among those convinced of the efficacy

of the treatment, as to the mode, technique, frequency, and number of the injections.

It has not yet been determined whether the favourable results obtained are to be attributed to the infinitesimal amount of arsenic which finds its way into the subject's cerebro-spinal fluid, or to the creation of antibodies. Since the amount of recoverable arsenic in the blood diminishes rapidly after the intravenous injection has been completed, it follows that, if the curative quality of the serum depends upon the arsenical content, the strength of this quality would lessen as the interval between the injection of the salvarsan and the withdrawal of the salvarsanised blood lengthened.

If, on the other hand, the beneficial effects are attributable to antibodies, a sufficient period after the injection of the salvarsan and before the withdrawal of the blood must be allowed to elapse in order to permit the antibodies to reach their highest possible development. Thus it happens that there are those who, on theoretical grounds, advocate a reduction of the prescribed one hour interval of the Swift-Ellis method, and others who, on a different theoretical basis, insist that at least twenty-four hours should elapse before the blood is withdrawn.

It has been pointed out by B. Sachs, I. Strauss, and D. J. Kaliski,<sup>(1)</sup> on the authority of Prof. Benedict, of the Cornell Medical School, who determined for them the quantity of arsenic present in the blood at different intervals after the injection of salvarsan, that the spinal fluid after simple intravenous injection of salvarsan contains a larger *per cent.* of arsenic than is present in the diluted serum used for intraspinal injection. These observers conclude that, whereas salvarsan combined with mercury is the most effective remedy yet discovered for cerebral and cerebro-spinal lues, the intraspinal method of treatment has no advantage over the intravenous.

Several writers have stated that in their opinion the apparent superiority of the results of intraspinal injection is due entirely to the greater number of injections given by those who have used this method. Between salvarsan and neosalvarsan it has not yet been determined which offers the greater promise in these various methods.

To one who views these numerous studies with an unprejudiced mind it seems apparent that the difference in opinion is in a large measure due to the failure on the part of the observers to take into account all of the related data. It is well known that general paresis, as a rule, runs a more rapid course in extremely young adults than in older victims, and it is necessary in all syphilitic infections to consider the age, sex, colour, and condition of the subject previous to the syphilitic infection, previous to the incidence of parietic signs, and previous to the treatment, the amount, duration, and character of previous treatment, and the virulence and direction of attack of the infection.

That these newer modes of treating syphilitic diseases of the nervous system have, on the whole, strengthened and widened the medical resources for control of the disorders is beyond question. It has been my good fortune to see, as a result of repeated injections of salvarsanised

<sup>(1)</sup> *Amer. Journ. Med. Sci.*, 1914, vol. cxlviii, p. 693.

serum, the reincarnation of manhood in a paretic who, before the introduction of this form of treatment, would have been regarded as hopelessly doomed to dementia ; I have also watched the steady downward progress of other paretics treated as actively, and by the same method, as was the one who was helped ; and I have noted a temporary gain under the same treatment by others who later went the way of the classical paretic.

In time we shall understand the laws underlying such divergent results.

No account of the progress of psychiatry in America would be complete without reference to recent efforts to obtain a better understanding of the conditions underlying juvenile delinquency. Juvenile courts have been established in many cities, and there is a genuine awakening to the infinite good to be accomplished by doing away with the older stereotyped police court methods of dealing with delinquents old and young alike as a class, and by substituting a treatment planned according to the particular needs of the individual. In this work magistrates are co-operating with specialists in psychiatry, psychology, and sociology. Chicago has established a system which offers an excellent example to other municipalities.

Under the leadership of Wm. Healy, Director of the Psychopathic Institute of the Juvenile Court of Chicago, a movement is under way which gives promise of revolutionising criminology as related to both old and young offenders. A paragraph from the *Illinois Medical Journal* (October, 1914, p. 359) is worth quoting in the interest of the "better understanding" which Mr. Healy is seeking to promote :

"With development of these better understandings many remedial agencies have been set at work. In the Detention Home the wards of the court profit by the daily attentions of a physician, a dentist, a corps of teachers, an instructor in physical training, and resident nurses. The court sends to the best specialists all cases of defective vision, and the many other ailments which need attention. It obtains country life for many of those who need it. It runs a definite employment agency, which endeavours to place the individual at work for which he is especially fitted. It aims to place in proper institutions those who are afflicted. Above all, it endeavours to co-operate with relatives and awaken them to the needs of their own kin. So it has come about that in the sessions of this court one may hear considered the correlations between defective vision and failure in school and in employment, which, of course, lead directly to delinquency. One may hear discussed the relationship of epilepsy to moral unreliability, of the effects of various debilitating habits in producing mental instability or lethargy, or the connection between mental defect and criminality. All these, and many other things, should be considered by officers of a court, as well as the more obvious effects of bad companionship, lack of parental control, and other weaknesses in environmental conditions."

There are indications on every hand of an awakening to the importance of attending to children sick in mind, not alone those whose behaviour brings them into conflict with the law of the land, but any who give signs of becoming aught else than normal citizens.

Anxiety as to insanity in adults of the next generation may be justly given up to the extent to which we can guarantee the mental health of the children of to-day. L. Pierce Clark,<sup>(2)</sup> under the title "Psychopathic Children: What New York City is Doing for Them," has written a paper pleading for "more intensive study of child, and even infantile, life." He recommends the establishment in the public schools of all large cities of a department "for clinical study of the frank psychopathies of school-children."

Clark summarises a tentative scheme for examination of psychopathic children as follows:

"NAME, AGE, FATHER'S AND MOTHER'S NAME, ADDRESS.

The child's main difficulties.

School record in normal classes.

Intellectual tests: *Simon-Binet and its modifications.*

Family history: *Data obtained from parents by physician and social worker.*

Personal history: *Chronologic physical development of the patient from birth, made up of facts obtained by physician, social worker, and from parents.*

Physical and neurologic examination.

Mental examination: *Inquiries and observations regarding general appearance, manner, conduct, etc. Mental development of infancy and childhood. Personality study. Patient's own story in regard to his difficulties, and how he thinks they may best be set right. Social report on environmental, social, and economic conditions.*

Other facts concerning the child.

Summary of the case.

Treatment and correctional methods recommended.

Observation in ungraded class.

Results of re-examination."

To find some measure whereby may be estimated the importance to be ascribed respectively to inherited tendency, previous experience, personality, and immediate stress as factors in the production of insanity in the individual is the earnest endeavour of many American psychiatrists. Effort in this direction may be seen not only in studies concerning psychopathic children and juvenile delinquency, but also in the broad and comprehensive methods lately advocated for the investigation of mental disorders in adults.

August Hoch, Director of the Psychiatric Institute of the New York State Hospitals, continuing his investigations<sup>(3)</sup> of the mental make-up of persons who develop mental disease, has, with George S. Amsden,<sup>(4)</sup> published another paper on the relation between personality and the psychoses. The authors suggest, as a guide, a large number of ques-

<sup>(2)</sup> *New York Med. Journ.*, April 11th, 1914.

<sup>(3)</sup> Hoch, August, "The Constitutional Factors in the Dementia Præcox Group," *Rev. Neurol. and Psych.*, August, 1910.

<sup>(4)</sup> Hoch, August, and Amsden, George S., "A Guide to the Descriptive Study of the Personality, with Special Reference to the taking of Anamneses of Cases with Psychoses," *State Hospital Bulletin* (N. Y.), November, 1913.

tions to be put to those from whom information is sought regarding that "period of the patient's life in which compensation, so to speak, has not yet started to break down, *i.e.*, the so-called normal period of the lives of such individuals, and not the actual mental disorder in the stricter sense."

Under the headings of this guide are questions involving :

- (1) Traits relating essentially to the intelligence, the capacity for acquiring knowledge, the judgment, etc.
- (2) Traits relating essentially to the output of energy.
- (3) Traits relating essentially to the subject's estimate of himself.
- (4) Adaptability toward the environment.
- (a) *The more striking traits which on their abnormal side interfere in a rather general and striking way with contact with the environment.*
- (b) *Traits which in a more specific, but in a less obvious, way interfere with contact with the environment.*
- (c) *Traits which show to what extent the subject lays bare to others his real self.*
- (d) *Traits which in normal proportions are useful qualities, but in exaggerated form interfere with efficiency.*
- (e) *Traits which show a tendency to active shaping of situations, or the reverse.*
- (f) *Traits showing the attitude towards reality.*
- (5) Mood.
- (6) Instinctive demands, traits which are more or less clearly related to the sexual instinct.
  - (a) *Friendship.*
  - (b) *Attachment to members of the family.*
  - (c) *Attitude towards the other sex.*
  - (i) *General.*
  - (ii) *Specific sexual demands.*
  - (iii) *General traits derived from sexual instinct, or reactions against its assertion.*
- (7) General interests.
- (8) Pathological traits."

Investigations such as those mentioned above relative to delinquency and mental disorder in children, and concerning the personality of adults previous to the outbreak of their mental disorder, indicate the desire of American psychiatrists to acquire a broad knowledge of the fundamental factors of mental disorder. These researches contrast favourably with the weird demonstrations of the pseudo-scientific methods of so-called psycho-analysis as preached by Freud, and so voluminous exploited in the medical journals of recent years. Admitting the good intent of Freud and his disciples in seeking the first wayward tendency of the mind in its earliest sexual awakening, it must ultimately be apparent that such efforts deal with but a limited number of an infinite variety of experiences contributing to the formation of mental and moral character.

Despite the suggestion of delicate subterfuge in a system of examination which depends largely upon the analysis of time reactions in the responses of the subject to most innocent appearing stimuli, the disregard of scientific precautions against error of interpretation, and the eager acceptance of any and all reactions capable of being forced into

the artificial scheme or dream of the investigator, are almost ludicrously clumsy.

At the risk of being declared unprogressive, ultra-conservative, and even stupidly unappreciative of the finer developments of psychologic research, I have regularly contended in these yearly contributions, and in other publications, that no possible advantage over a straightforward common-sense approach to the problems of psychiatry could be found in the chimerical experimentation used by many who are seeking information about subconsciousness. Among investigators who would regard with scepticism the uncanny revelations of crystal gazers, or the weird testimony of one who had been affected by the unnatural environment of a spiritualistic *seance*, are those who pursue their questioning in a darkened room, where the silence can only be broken by the subdued voices of the examiner and the examined. In the effort to shut out all distractions they are introducing the same element of strangeness which, because of its incalculable emotional effect, destroys the reliability of the testimony of the spiritualistic medium.

The part which the stop-watch plays in measuring the time elapsing between question and answer has supplied an appearance of scientific exactness to the reaction time examination for which the term *psycho-analysis* has been so widely appropriated. The use of an instrument of precision, lending to the examination something of the dignity of laboratory technique, sufficed to blind many earnest workers to the untrustworthiness of the entire procedure.

Moreover, in America, as I have no doubt elsewhere, eager but not sufficiently discriminative students have accepted without question the dicta—false, despite their deceptive tone of logical directness—that the readiest approach to subconsciousness is through subconscious channels, and that errors of conscious activity resulting from morbid repression of subconscious emotions and ideas can best be corrected by elevating the repressed subconscious factors, and harmonizing them with the higher conscious life, through direct appeal to the subconsciousness in hypnotic and hypnoidal states.

That the vastness of the nonsense of such arguments should escape the recognition of many honest workers who have accepted them is remarkable. It would have been as reasonable to insist that Columbus could discover new realms only by forsaking ships, well known in the old world, unknown in the new, and by climbing up one moonbeam and down another to the promised land. It would be as plausible to declare that the only mode of preventing the repetition of a child's outbreak in uncontrollable anger is that of first deliberately inducing the repetition and then appealing to the child in anger. According to such principles, the correction of insomnia could best be accomplished by waiting until the sufferer slept and then awakening him to explain the error.

Fortunately, common-sense may always be depended upon to correct ultimately the temporary erraticisms of scientific endeavour, and it is highly satisfactory to find, in reviewing American psychiatric literature of the year 1914, that, as compared with the years immediately preceding, the exploitation of the flimsy theories of so-called psycho-analysis has largely given place to the reports of more sober-minded investigations.