fear. Her account of her motives was very variable and inconsistent, and in some details obviously false; but it appeared probable that the acts were the outcome of obsession; she asserted that their completion was followed by a peculiar sense of relief. Her intelligence was perfectly lucid, and there was no indication whatever of delusions or hallucinations. Physical examination failed to show the presence of any stigmata of degeneration, or of any signs of hysteria, or of any organic disease. Her menstruation had been irregular, but no relation was traced between this function and the disorder of conduct.

In accordance with the medical evidence that she was suffering from moral insanity, she was found irresponsible, and was committed to an asylum. Towards the end of her first year there she began to show distinct evidence of mental failure with some emotional depression, to which definite persecutory delusions were soon added. These delusions were at times sufficiently pronounced to lead her to refuse her food for long periods.

Discussing the case, the author draws special attention to the late development of the delusional symptoms, pointing out that their occurrence, which is not infrequent in the course of moral insanity, is a strong argument for the contention that intellectual involvement in some form is an essential feature of the disease.

W. C. SULLIVAN.

Dementia Pracox. (Journ. of Ment. and Neur. Dis., June, 1905.)
Sachs, B.

This paper was read by the author before the American Neurological Association in September, 1904, to open the discussion on "Dementia Præcox."

He enters a strong and much-needed protest against the tendency of present-day alienists to diagnose a vast majority of the cases of mental diseases in youthful individuals as cases of this form of insanity.

There are definite cases which fit in admirably with the description as given by Kraepelin, and this is particularly true, he thinks, of the earlier forms of mental derangement occurring in members of families in which there is a very marked psychic taint, but even in such individuals many years may pass before appreciable dementia sets in. In his opinion the term should be carefully restricted to such cases in which mental deterioration at an early stage of the disease is clearly recognisable, and should be carefully considered, and possibly avoided. in those cases in which a dementia may possibly be developed in the far distant future. He considers that making the diagnosis of dementia præcox puts the stamp of an incurable malady upon persons who may be sufficiently alert to be useful to themselves and others for a long period of years, and in that sense does them distinct injustice. He cannot see the gain in grouping widely different conditions under one heading simply because the individuals so afflicted are in the first third of life, and therefore thinks the older plan of clinical sub-division to be the more commendable, and that the tendency to dementia should be insisted on only when there is reason to think that a deterioration is certain to develop at a relatively early period. A. W. WILCOX.