

*Fluctuation of an Ambiguous Figure in Dementia Præcox and in Manic-depressive Patients.* (*Journ. of Abnorm. and Soc. Psychol.*, vol. xxvii, Jan.-March, 1933.) *Hunt, J. McV., and Guilford, J. P.*

The rates of fluctuation of an outline cube were investigated in cases of dementia præcox and manic-depressive insanity. The authors found that in dementia præcox the average rate of fluctuation was four times greater than in manic-depressive insanity. The paranoid types of dementia præcox showed a lower average rate than the rest of the præcox patients, a very wide range of rates and a great daily variation. The præcox group was almost identical with a normal group in average rate and in dispersion of fluctuations, showing that the manic-depressives are the cases which deviate from the normal. Some factor or factors in this group inhibit the fluctuations. Some subjects saw no fluctuations at all in spite of coaching.

G. W. T. H. FLEMING.

*Late Periodical Psychoses.* (*General Practice, April-June, 1933.*) *Porot, A.*

The occurrence of melancholia at the pre-senile and involuntional periods is discussed, and the question of classification raised. In agreement with Anglade, the author prefers to separate the involuntional group from Kraepelin's manic-depressive group, finding an organic substratum in most of his cases. The late or delayed psychoses are thus divided into two groups—involuntional and organic. The latter group is subdivided into four sub-groups—encephalitic, circulatory, traumatic and of unknown origin. Examples of each type are given. Involuntional melancholia is stated to occur between 45 to 60, and to be more frequent in women. The basic element is anxiety, and herein the condition is said to differ from the melancholic phase of the circular psychosis.

F. H. HEALEY.

*Schizophrenia in Children.* (*Amer. Journ. Psychiat.*, vol. xii, May, 1933.) *Potter, H. W.*

A typical schizophrenic reaction may appear long before pubescence. What little delusional formation there may be is exceedingly simple. The outstanding symptoms are found in the field of behaviour and in a consistent lack of emotional *rappori*. None of the cases reported have shown any marked improvement during the period of hospitalization. The schizophrenic child often appears mentally deficient because the libido is invested within the patient himself, thus interfering with the objectification of the intellectual processes.

M. HAMBLIN SMITH.

*Encephalographic Studies in Schizophrenia.* (*Amer. Journ. Psychiat.*, vol. xii, Jan., 1933.) *Moore, M. T., Nathan, D., Elliott, A. R., and Laubach, C.*

In a series of 60 selected cases, encephalography has proved to be a safe clinical procedure. In the majority of cases cerebro-spinal fluid pressure was high, indicating the presence of a chronic increased intracranial pressure. The study of the films indicated a tendency to selective atrophy involving the parietal lobes and the island of Reil; the amount of mental deterioration is reflected in the degree of this atrophy. Evidence of increased size of the ventricles was shown in 25 cases. None of the films showed a normal cerebral pattern.

M. HAMBLIN SMITH.

*A Case of Communicated Insanity [Un caso de locura comunicada].* (*La Semana Med.*, vol. xl, May 25, 1933.) *Soler, J.*

The patients in this case are sisters, æt. respectively 38 and 36 years. Owing to the death of their mother the eldest sister became responsible for the management of the household, and the younger sister was accustomed to obey the elder in all matters and to adopt her attitude towards her environment. The younger sister is of a lower grade of intelligence than the elder, and appears to be definitely feeble-minded. The elder sister developed delusions of persecution on the part of the neighbours, and communicated these delusions to the younger sister. They

applied for police protection, armed themselves with a revolver and took other protective measures. As a result, they have been admitted to a mental hospital. The elder sister appears to be incurable. Separation from the influence of the elder sister has produced some improvement in the younger, but it is likely that her mental deficiency will prevent further improvement.

M. HAMBLIN SMITH.

*The Church and Individual Security.* (*Amer. Journ. Orthopsychiat.*, vol. iii, Jan., 1933.) Reynolds, B. C.

Psychiatry must accept the limitations in the life-situations of its patients. We must be wary of setting up our personal norms. The church has a contribution to make to individual security, but it must co-operate with psychiatric workers. The clergy must give up preconceived notions of how people ought to think and feel and how they ought to be treated, and must be willing to learn how they actually think and feel and what it is that they desire. The church alone claims to stand for a world of ideals beyond the purposes for which people associate themselves in other organizations; and its belief in an "on-beyond" counts for much in the mental health of many patients.

M. HAMBLIN SMITH.

#### 4. Neurology.

*The Mental Symptoms Associated with 58 Cases of Cerebral Tumour.* (*Journ. of Neur. and Psycho-pathol.*, vol. xiii, April, 1933.) Minski, L.

Mental symptoms in cases of cerebral tumour depend on the rate of growth of the tumour and the previous personality of the patient. In slow-growing tumours personality changes predominate. In the present series, 14 of 58 examined were depressive and 7 maniacal. In rapidly-growing tumours changes in the intellectual sphere were marked, and personality changes slight. Twenty-five cases showed reactions simulating functional psychoses, and in 12 of these physical signs were absent.

G. W. T. H. FLEMING.

*Ætiology of Polyneuritis.* (*Arch. of Neur. and Psychiat.*, vol. xxix, April, 1933.) Wechsler, I. S.

Many cases of polyneuritis are not toxic in origin, but should be grouped with the avitaminoses. Many cases previously regarded as solely due to lead, alcohol, arsenic, etc., may have avitaminosis as an additional factor in causation. Apart from the anti-neuritic vitamins B<sub>1</sub> and B<sub>2</sub>, there is some experimental evidence that the absence of vitamin A and possibly also of C and D can lead to degenerative changes in the spinal cord, the roots and nerves, and that their presence will prevent degeneration caused by poisons which sometimes affect the nervous system.

G. W. T. H. FLEMING.

*Abolition of Bulbocapnine Catatonia by Cocaine.* (*Arch. of Neur. and Psychiat.*, vol. xxix, March, 1933.) Buchman, E. F., and Richier, C. P.

The authors investigated the action of cocaine on monkeys which had received doses of bulbocapnine and were in a "catatonic condition". They found that the cocaine abolished the catatonic state at once, while cocaine injected before bulbocapnine prevented its development. The hanging response which appears in macaque monkeys when under the influence of bulbocapnine is abolished by cocaine. As this response is abolished in monkeys by lesions of area 6 of Brodmann, it is possible that this part of the brain may be thrown out of action by bulbocapnine, and cocaine may act on the same area. It has to be remembered, however, that both these drugs act on subcortical centres as well.

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