emotional tests that have been applied are critically examined, and the view is expressed that the claims of intelligence testers as being able to reveal innate psychological differences among different groups have in no way been substantiated: that although the Jews may be intellectually superior and may possess unique psychological faculties, no technique is in existence at present for their evaluation. The former trend in thought which ascribed to heredity or nature preponderant weight in the formation of these psychological differences is found to be untenable, and the view is suggested that in dealing with large groups of people as distinct from special family lines environment is of overwhelming and pervasive importance.

C. S. R.


The alcoholic is a highly sensitive self-indulgent individual with an extremely easily wounded amour propre. Self-criticism no less than the adverse opinion of others is peculiarly irritating to him. He seeks to evade all responsibility for his maladjustment and blames any circumstance rather than himself. He suffers from a feeling of inferiority and desires excessively the society, sympathy and love of his fellows. Boastfulness and confabulation conspicuously cover his inferiority complex, whilst conviviality and intimate contact with his fellows afford occasion for the release of obscene wit and homosexual trends.

Alcohol, by producing euphoria, blunting the critical power and progressively relaxing inhibitions, permits of a flight from reality which up to a certain point is pleasurable, but when it is pushed too far regression proceeds to lower psychological developmental levels and the return of the repressed from these levels causes great anxiety and antisocial behaviour. Thus in the long run alcohol is liable to defeat the ends for which it is taken.

C. S. R.

NEUROSES AND PSYCHONEUROSES.


Stuttering is regarded as a difficult combination of organic and constitutional and functional factors that requires speech training, such as may be used for the training of the speech and voice of non-stutterers, and also a definite knowledge of mental hygiene in order that hampering emotional fixations may be resolved. These emotional problems cannot be adequately treated by good will and a kind heart and inspirational talks. It is believed that an adequate treatment of stuttering must combine physical hygiene, mental hygiene, and speech training in a unified and well-rounded manner.

C. S. R.
The significance of a neurotic reaction as a precursor of schizophrenias.


After a brief history of dementia praecox and the neuroses, some clinical examples are given of cases illustrating the relation of neurotic symptoms to schizophrenia. In order to ascertain the incidence of the type of case under discussion, a series of 100 schizophrenic reaction types were investigated. Of the total cases, 29 patients made readjustments, which have been maintained in 22, who have therefore recovered: while seven have made a partial readjustment only, and are not functioning members of society, although they do not require to be in hospital. Out of this group of 29 it was found that nine cases showed sufficiently marked symptoms of a neurotic type in the prodrome to justify their inclusion in the variety of case under consideration. Out of the total 26 examples could be demonstrated as having a neurotic reaction first and later psychotic.

The points of importance are that a progression from a neurotic to a psychotic reaction not uncommonly takes place. The neurosis may be clear-cut, and may exist as a condition in its own right, without psychotic features, for a considerable period of time. The pre-occupations or content of thought can be shown to be the same during the neurotic and the psychotic phase. It is suggested, therefore, that the difference between neurosis and psychosis is in a large measure one of degree in the same process of mal-reaction to some psychic difficulty. The findings give grounds for a more cautious view of neurotic reactions, and a less pessimistic attitude towards the schizophrenic.

C. S. R.

PSYCHOSES.


Some observations are given here on 114 problem children of various types referred to a child-guidance clinic. Particular attention was directed to 19 of these cases which were called 'schizoid' children. Comparisons were made between the total group and the smaller special group, particularly in the matter of phantasy productions. While no syndrome was formulated to facilitate diagnosis and prognosis, several criteria were utilized in judging the nature and extent of the children's maladjustment. These were (1) the nature and extent of the child's social incapacity; (2) his habitual reaction to the situations and requirements of reality by withdrawal rather than by attack or by conforming; (3) the nature, extent, and purpose of his phantasies;