
In 1904 Wernicke described as cramp neurosis a peculiar condition of general cramps throughout the body, identical in their pain and contractions with those of a local kind. The affection is stated to be extremely rare, but the author has seen three cases within a comparatively short time. He considers that it has its basis in a combination of a minimal polyneuritis or radiculitis with defect in uric acid metabolism, and believes it originates in peripheral nerves and muscles, not centrally. Spondylarthritis deformans also seems to play a contributory role.

J. V.

PSYCHOSES.


Dementia praecox is regarded as a disorganization of the personality developing during the period of adolescence or maturity. It is characterized by incoordination of the mental mechanisms and is associated sooner or later with intellectual deterioration without any definite organic basis which can be demonstrated at this time. Psychologically, it is the reaction of an inadequate personality to the difficulties of his environment. This inadequacy is not demonstrable in the intellectual field but expresses itself in an inability to react, as the normal well-balanced personality does, to the difficulties encountered during the course of the educational, economic, sexual, emotional, domestic, or social life of the individual. The inadequate personality may evince itself in any one of these spheres. Dementia praecox is looked upon as a clinical entity—a psychosis the principal and characteristic features of which may be either: (1) a primary progressive deterioration; (2) an autistic or dereistic withdrawal from the environment; or (3) an intellectual incoordination. All of these types end eventually in a partial or complete deterioration. Schizophrenic episodes, syndromes, or reactions not belonging to the dementia praecox group conform in a general way to the clinical picture of some types of dementia praecox, but do not deteriorate and are distinctly episodic in character. They occur in the course of mental deficiency, psychopathic personality, somatic diseases, traumatic conditions, alcoholism, epilepsy, the involution period of life, and even in senility and general paralysis. The assignment of these syndromes to the dementia praecox group undoubtedly explains the recovery rate in that disease reported by various authors.

C. S. R.
If anaerobic cultural technique is omitted in the bacteriology of insanity, the greater and most important part of the flora is inevitably missed. Anaerobic Klebs-Loeffler species exist in the tonsils and intestinal tract and in association with them are numerous closely allied bacteria belonging to the anaerobic diphtheroid group. Strictly anaerobic species of leptothrix bacteria have been found, which are probably closely related and similar in toxic action to the anaerobic diphtheroids. Both groups by ordinary methods of animal experiments are non-virulent to guinea-pigs, but may prove mildly toxic, and would appear to have an affinity for the lower alimentary canal. Systematic methods have clearly demonstrated the importance of the colon as the main focus of infection by the strictly anaerobic species of bacteria, and it is possible to trace their source in the minor foci of infection. The incidence of these organisms has been carefully compared in controls, and in those suffering from definite mental disorder, psychoneurotic and prepsychotic states. The results show conclusively that their occurrence is much greater in insanity and allied states—a fact which, it is claimed, must have an etiological significance of importance. The prepsychotic cases are regarded as being more liable to severe and lasting mental breakdown than those belonging to the psychoneuroses and neurasthenias. From the study and comparison of the action of known neurotoxic bacteria and the anaerobes in question, there would seem little doubt that the latter have a similar, though necessarily modified, toxic action to the former. In this process of modification certain specific neurotoxins are formed which exercise a selective action on the central nervous system. Endotoxic action is regarded as being an important additional factor in the production of neurotoxaemia. Such action, in addition to effecting slow degenerative changes in the nerve tissues of the brain, has marked local effects, especially on Auerbach’s nerve-plexus and the autonomic system. The condition of tonic hardening of the colon results in perverted action of the reflex arcs centred in the cord, and can give rise to disturbances of cerebral function. Also it is productive of the later and more extensive morbid changes in the lower alimentary canal, and responsible for establishing the conditions of severe toxæmia that lead to permanent mental disorder. Neurotoxins absorbed from the alimentary canal or elsewhere may reach the brain by two possible routes—one by the systemic circulation, the other via the nerve-trunks and spinal cord.

C. S. R.

The author points out two errors in estimating the subject under discussion: (1) the difficulty in knowing what is normal and what is abnormal; (2) the tendency to attribute the accompaniments of acute symptoms (convulsive attacks, etc.) to the pathology of the original disease. He believes, however, in an organic basis for schizophrenia although it cannot at present be exactly defined. This conclusion does not rule out the ‘functional’ nature of the manifestations or even the ‘functional’ origin of the condition.

R. G. G.


This is a careful study of the form of mental affectation described more particularly by the French school of psychiatry as chronic hallucinatory psychosis. The writer considers that the ideas of persecution with which it is often found associated originate in a disorder of personality and in particular of intelligence; the condition is sometimes seen in those who have abused alcohol, and should be classified with schizophrenia; its characteristic feature is the predominance of delirium, with which the hallucinations are combined.

J. V.


The inference drawn is that introverts and schizophrenics have a low synaptic resistance, and that extroverts and manic-depressives have a high synaptic resistance. Hence these temperamental types may be conditioned by the state of the synapses of the central nervous system. It is a likely hypothesis that the resistances of the synapses are influenced by the action of drugs. It would therefore appear a justifiable assumption that the essential basis of temperamental variety, the causal factor lying at the root of inborn idiosyncrasy, is the presence in the organism of some substance akin to the two classes of drugs investigated. This substance, probably derived from the activities of the endocrines, may influence temperament through its action upon the sympathetic or autonomic systems, as some of the results obtained from adrenalin, ephedrine and atropine would appear to indicate. The main evidence, however, points to an action upon the
synaptic junctions, an action that is brought about in all probability as a result of the influence of some product of general metabolism circulating in the body. The present trend of physiological opinion is that nerves produce their effects through the intermediary of chemical agents. The researches on acetylcholine and histamine would appear to substantiate this contention, and to show a close connexion between nerve action and chemical stimuli. That the product postulated has a chemical action akin to that of the classes of drugs examined is a hypothesis that would appear to have some foundation in experimental fact.

C. S. R.

PSYCHOPATHOLOGY.


There are three orders of phenomena, bearing on hallucinosis, in the course of which the organism functions as a whole, and these may thus be summarized: (1) Certain drugs can produce visual hallucinations, and it is known that their point of attack is the organo-vegetative system. (2) In all hallucinated persons a particular state of consciousness exists, analogous to but not identical with half-sleep, which the author describes as 'depersonalization.' (3) The characteristic phenomenon of projection or exteriorization in reference to the self of the subject concerned is always in evidence.

The theory here suggested is that the sphere of orientation is always invaded, under certain circumstances, by that of the instincts. The state of depersonalization is not specific, but spatial projection is; the apparatus for projection is deranged by the invasion mentioned. At any level in the organo-vegetative system the trouble may have its starting-point.

J. S. P.


The description of the symptomatology of puerperal insanity dates only from 1875. An investigation of 54,000 cases of labour at the Rotunda Hospital revealed 81 cases of insanity, i.e., 0.17 per cent. At Grangegorman Asylum the percentage-rate for all cases of insanity was nearly 5. The ratio of cases of insanity to the number of births registered in the Irish Free State in the three years 1928, 1929, and 1930 was 162 to 175,780, i.e., 0.9 per cent. Toxaemia, sepsis and chorea are probably the chief predisposing factors in puerperal insanity.

C. S. R.