kleptomania and miserliness are regarded as anti-social shows that the crude instinct is socially under control; the question therefore arises as to how far normal social acquisition is instinctive. Individual modification probably accounts for the different degrees in the human species.

In Melanesia a peculiar individualistic and communistic behaviour towards property exists. Nothing is known of individual ownership, and this common ownership is characteristic when applied to land; this is not quite universal, however, as in one island it is customary for the parent when clearing land to allot a portion of it to his children. A comparison is made between the disputes arising in consequence of this, and those connected with the acquisition of territory by birds. In man acquisition is a primary and more deeply-seated process, but in the bird and Melanesian it has been partially suppressed for social requirements. The Melanesian example shows the association of communal ownership with peace and individual ownership with strife. Both Melanesian and bird show that individual acquisition can be so greatly modified in response to gregarious needs that it practically disappears. Is this due directly to the gregarious instinct or to social tradition and example? Both Melanesian and European are individually acquisitive, and it is probable that this instinct has been modified by social conditions rather than by the gregarious instinct. This should satisfy those who advocate a change in the social attitude towards property.

ROBERT M. RIGGALL.

PSYCHOSES.

[178] Acute psychoses arising during the course of heart disease.

Among the more important types are the following: (1) Auditory and visual hallucinations, usually recognized by the patient as such. (2) A state of confusion as a constant symptom, or only present on awakening from or on going to sleep. This mild type is common in myocardial cases with auricular fibrillation with or without decompensation. (3) Excitation with decided disorientation is not infrequently seen in elderly persons suffering with fibrous myocarditis. In some cases the state of excitement alternates with complete apathy and silences. (4) Acute mania may arise very suddenly and defy all efforts at control. (5) Delusional states, which usually take a persecutory form. The author has only seen the persecutory type in lesions of the aortic valve. (6) During attacks of Cheyne-Stokes breathing, there is at times in the dyspnoic period a state of mental excitement or delirium which subsides during the apneic period.

Riesman then briefly considers the causes of what he terms the cardio- genic psychoses. In a psychopathie individual the connection may be accidental. A probable factor in some cases at least is kidney disease and uraemia. Acidosis may perhaps play a part sometimes. Drugs and poisons may be etiological factors. In a patient with disordered circulation alcohol may easily lead to a psychosis, and more than one writer has held digitalis responsible for maniacal and other acute psychopathie outbreaks.

C. S. R.

True mental disease in children is very rare, and out of 5000 consecutive hospital admissions there were only 18 cases under the age of 15. In 4 cases the type was doubtful; in 10 the diagnosis was manie-depressive psychosis (the depressive element being much more pronounced); and only 4 were brought under the heading of dementia praecox. These statistics do not include post-infectious mental disease, juvenile paroxysms, or psychotico-epileptic episodes in epileptics. In children the symptomatology seems more simple. In the manic-depressive group the depression was often only an elementary emotional reaction and only supported by vague delusional formation. Mental confusion occurred frequently. Mental symptoms occurring in the course of, or as sequels to, the infectious and contagious diseases of childhood are frequent. We may expect a varying grade of delirium, and subsequently an unmotivated excitement or depression with considerable confusion, often without delusions and hallucinations. The clinical picture of the psychoses which follow epidemic encephalitis in children is more or less uniform. There are impulsive, purposeless motor acts. marked irritability, attention disorders, distractibility, an inconsistent, variable, and unstable emotional reaction, marked insomnia, and occasionally intense eroticism and precocious sexual feelings.

In speaking of the potential psychoses of childhood, Strecker draws attention to the shut-in type of personality which may eventuate in dementia praecox, and the undue amount of emotional stability, often with pronounced moodiness and sulkiness, seen in some, which may indicate a manic-depressive temperament, though this is less clearly recognized at an early age. Mental hygiene in children is seen from modern study to be of great importance.

C. S. R.


Under this heading the author includes those psychoses that develop after a physical ailment from which the patient has recovered, such as infectious disease, confinement, trauma, in discharged soldiers, or in chronic alcoholics after they have stopped using alcohol.

Twelve typical case histories are given. The majority run a course resembling that of the dementia praecox group, but they are easily distinguished. The symptoms of post-somatic psychosis are: sudden onset, fear, confusion mild or severe, slight amnesia, hallucinosis mostly of the auditory type; physical findings of exhaustion; in some cases the signs simulate paresis. The prognosis is better than that of dementia praecox, from 40 to 50 per cent recovering under proper treatment. Lemchen suggests that the mental symptoms in patients suffering from an infectious disease may be due to the alteration in the serum which causes the neurones to react differently. What is true of infectious disease is also true of pregnancy, as antibodies are formed in the mother to counteract the destructive tendencies of the ovum toward the mother's tissues. In alcoholics there is also something formed to neutralize the injurious effects of excessive
indulgence. In trauma during repair the serum must surely be altered. We may conceive that, in the majority of people after returning to normal, the altered albumins will be reconstructed by some of the organs of the body, of which the liver, thyroid, and suprarenals seem to play the chief rôle: while in others those organs for some reason or other do not reconstruct the altered albumins in the serum, and a psychosis will result.

Treatment should consist in strengthening the neurons and destroying the irritating albuminous body in the blood. For the former, nerve tonics, continuous baths, exercise, and nourishing food are indicated; while the second factor must be attacked by seeing that the special organs involved in reconstruction are functioning properly, and perhaps helped through the administration of thyroid extract and adrenalin.

C. S. R.


The author gives a genealogical tree extending through five generations and bearing 75 persons. These include 9 schizophrenics, 1 epileptic, and 1 senile dement, besides 14 persons who did not require institutional care and who might perhaps have passed as normal, but in whom careful examination and inquiry revealed psychopathic traits, latent schizophrenia, or prodromata of dementia praecox. The author gives notes of all these cases, points out how important it is in all such studies of heredity to pay specially careful attention to the supposedly sane members of the family, and offers the material that he has here collected as a contribution to the study of schizophrenic inheritance.

Further, he investigates the applicability of Mendelian principles to this material. He concludes that the character 'schizophrenia' is recessive, and not sex-limited, even if, as Rüdin has maintained, it is dihybrid. Where, in this tree, the frequent appearance and continuous transmission of the character may suggest dominance, there is seen to have been a convergence of bilateral psychotic taint (recessive homozygote with heterozygote; RR with DR). Rüdin came to the opinion that "the persons in any way psychotic who are parents of dementia-praecox patients are distinguished from persons of sound stock through their producing a germ in which dementia praecox cannot indeed develop directly, but which, by reason of the likewise special constitution of the germ of the partner, receives in fertilization a supplementary element hitherto lacking in the substratum of disposition; thus first is instituted that dispositional whole out of which a dementia praecox can evolve." But in reference to these families investigated by Heise, the latitude that Rüdin allowed himself, by speaking of parents "in any way" psychotic, is superfluous. Heise can be more strict in the terms of his conclusion; for wherever, in this material, psychoses appear that are certainly or probably schizophrenic, there he finds that the special taint exists in the families of both parents—and in an unusually pure form, mostly as a manifest schizophrenia.

Sydney J. Cole.
Abnormal mental states encountered in a detention prison.—
M. KESCHNER. Arch. of Neurol. and Psychiat., 1921, v. 382.

For the purposes of study, the prison population is dealt with under the headings: (1) The accidental criminal; (2) The occasional criminal; (3) The insane criminal; and (4) The habitual criminal.

1. The accidental criminal shows no intellectual defect, but is emotionally unstable, and under stress he may easily commit assaults. After commitment he finds difficulty in adjusting himself to his environment, and frequently develops a prison psychosis or Ganser's syndrome. His clouding of consciousness after much anxiety seems an attempt to exclude the painful impressions and reminiscences from consciousness.

2. The occasional criminal is stated to be defective in will power, very suggestible, and generally unstable in character. These constitute three-fourths of the 'detention' prison population, and often develop into habitual criminals. Many of them have dementia-præcox personalities, and differ from a later psychopathic type in that they have no intellectual defect.

3. The insane criminal constitutes only a small fraction. Among the committable cases are specially noted the deteriorated paranoiacs and the manic-depressives. Acute toxic or infectious conditions (apart from alcoholics and drug addicts) are uncommon, while the most difficult forensic problems are presented by the periodic insane and the epileptic. Among the non-committable, attention is specially drawn to the paranoid states which prisoners tend to develop when deprived of liberty and having no one to open their hearts to; depression, with delusions and visual and auditory hallucinations may ensue. The acute prison neurosis of the anxiety type is frequently seen just prior to parole or discharge and among those awaiting trial as the result of an appeal. This occurs mostly in persons of constitutional inferiority, and in those who have been charged with sexual crimes.

4. The habitual criminal is subdivided into the instinctive criminal, the professional or incorrigible, and the feeble-minded criminal. It is with this last class that the writer mainly deals, and he more or less briefly describes the wide group of constitutional inferiors as classified by Scholtz. They comprise the indolent type, the depressed, the maniacal, the impulsives, the imperatives, the pathological liar, the epileptic, the perverts, the prostitute, kleptomaniacs, the alcoholics, drug addicts, and hysterical type. Under those headings psychopathological observations of interest are made.

C. STANFORD READ.

NEUROSES AND PSYCHONEUROSES.

The influence of the endocrines in the psychoneuroses.—

LANGDON BROWN points out that the apparently peaceful integration of higher organisms is in reality only accomplished as the outcome of a concealed struggle between its several component tissues, the final result of which is the supremacy of the central nervous system. He compares the origin of the nervous system with a group of settlers on a coast, who
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