ABSTRACTS

air of distraction; often normal in appearance, their schizoid tendencies may not be revealed except by minute psychological investigation. Numerous persons of genius, artists and others completely absorbed in artistic creations, exhibit in fact secret inclinations towards the schizoid state.

A contrast may be drawn between this schizoid constitution and (1) the mythomanic constitution, characterised by an innate tendency to con-fabulation and simulation; (2) the paranoiac constitution, with its tendency to transform and exaggerate the facts of real life, its pride and mistrust, its suspicions, ideas of persecution, etc.; and (3) the affective constitution of the psychasthenic. The authors consider Bleuler’s schizoidism to be merely a general attitude towards the environment, accidental and occasional, whereas the schizoid constitution should appear the same from whatever angle it is envisaged.

J. S. P.


These authors conclude: (1) Affective disorders expressing themselves in states of depression or elation occur as important sequelae of acute epidemic encephalitis. (2) Suicidal attempts are frequent. (3) It is important to safeguard patients suffering from this form of sequela. (4) The value of the rest cure in the treatment of these affective disorders is to be greatly emphasized. (5) The prognosis in these cases, while guarded, is favourable in many cases in which a complete rest cure is given.

C. S. R.

[137] The objective findings in the psychoses.—P. J. TRENTZSCH. Arch. of Neurol. and Psychiat., 1924, xii, 370.

A group of patients suffering from various psychoses were subjected to test, designed to determine the relationship of the neurocirculatory system to the different types of mental disorder. From observations on the pulse rate and blood pressure it was found that hebephenic and katatonic patients did not respond in the normal manner after exercise, 82.6 per cent. of the cases having a low neuropsychiatric rating; in the paranoid group of dementia praecox the results were normal. A study of the weight of the heart in the psychoses showed that 75.5 per cent. of the dementia praecox series, 30 per cent. of the patients with manic-depressive insanity, and 30.2 per cent. of epileptics had hearts weighing less than the average.

R. M. S.

PSYCHOPATHOLOGY.

[138] The pathological histology and the pathogeny of dementia praecox, etc. (Récherches sur l’histologie pathologique et la pathogénie de la démence précoc, de ‘l’amentia,’ et des syndromes extrapyramidaux).—V. M. BUSCAINO. L’Encéphale, 1924, xix, 217.

In ten typical cases of dementia praecox Dr. Buscaino has found local lesions
of the cortical nerve cells (mainly those of the outer layers 1–4) consisting in ‘homogenisation’ of nucleus and protoplasm; very frequent and definite changes in the glia (increase in size of glial nuclei, alteration of contour, clusters of glial nuclei); in particular, however, he has noticed the presence, in nerve-fibre paths and extracortical grey matter, of local plaques of an abnormal substance, with peculiar staining characters, usually in the vicinity of blood vessels. These plaques occur in grape-like clusters and involve chiefly the myelin of the nerve units. They are abundant in the basal ganglia, especially the thalamus, and in the author’s opinion can be taken to explain the intellectuo-affective dissociation of dementia praecox. Believing that the regulating mechanisms for the somatic expression of the emotions have a site in the basal ganglia and mesencephalon, he considers that the presence of lesions in these, as well as in conduction paths of the white matter, accounts for the above-mentioned dissociation.

His findings have been confirmed by Salustri and Ansalone in Italy, by Marcus in Sweden, and by Snesareff in Russia. Others have attributed the plaques to artefacts, but this is strenuously denied by Buseainó. He holds, further, that the catatonia of some varieties of dementia praecox is an extrapyramidal symptom, the result of the presence of his ‘plaques of disintegration’ in the corpus striatum.

Prosecution of urinanalytical researches in all his cases of the disease has convinced him of the constant presence of abnormal amines (derivatives of histamine). They are present, also, in cases of mental confusion (amnésia). The conclusion drawn is that the plaques form one of the histological expressions of the action of these abnormal amines on the nervous tissues, and that the amines are derived from the intestine, where they are formed probably by acute or chronic processes of micro-organismal infection.

J. S. P.

[139] Recent work on lesions of the central nervous system in dementia praecox (Quelques travaux récents sur les lésions du système nerveux central dans la démence précoce).—Paul Schiff. L’Encéphale, 1924, xix, 481.

There are three principal questions in reference to the pathological anatomy of dementia praecox which call for decision: (1) Are cerebral alterations, capable of being considered an anatomical foundation for the affection, constantly found? (2) Are they sufficiently typical to be regarded as diagnostic? (3) Are they primarily cerebral, or secondary to an extracerebral somatic condition?

Without doubt, according to Klarfeld and others, pathological changes are constantly found, but they are microscopical, exclusively ectodermal, and exclusively degenerative. Inflammatory alterations do not belong to the picture of dementia praecox. The ectodermal tissues, both parenchymatous and neuroglial elements, show such changes as cell atrophy (not pathognomonic—Klarfeld), which is seen mainly in the outer layers of the cortex (not attacking any specific layer), and increase of glial nuclei, with amoeboid changes in the glial cells, hyperlobulation of nuclei, tendency to synctium-formations, etc. Klarfeld concludes that these are primarily
degenerative cerebral conditions, and that the endocrine modifications
described by Mott are purely secondary.

Josephy lays stress on the uncertainty surrounding the question of the
specificity or otherwise of the clinical state called dementia praecox, yet comes
to categorical conclusions as to its pathology. His work is based on the
examination of no less than forty-five brains derived from dementia praecox
cases. We may mention the following deductions from his material: (1) The
most common lesions are, fatty degeneration of the pyramidal cells of the
cortex, sclerosis of cortical cells, which stain deeply and exhibit a 'corkscrew'
appearance of their processes, and lacunes of cellular disintegration, in patches.
These cell changes are seen mainly in the third cortical layer, whereas the
second and fourth seem always normal. (2) Neuroglial proliferation of the
superficial layers of the cortex, but in Josephy's view this is much less charac-
teristic than the cellular lacunes mentioned above. (3) Lesions in the basal
ganglia, pons and medulla are also extremely frequent (fatty infiltration and
glomerular proliferation). He has not found the choroid plexus lesions mentioned
by Monakow, nor the 'plaques' of Buscaino, nor the gonad lesions described
by Mott.

Josephy is convinced that the cortical lesions cause the psychosis, and
that they are specific enough to be regarded as essential.

Schiff, however, points out that after all there is nothing new in the
contentions of Josephy, and that similar lesions were noted by Lhermitte and
Klippel a number of years ago. The recent articles of Buscaino rather stress the
lesions in the basal ganglia at the expense of those in the cortex. The
interpretations put on the pathological data by various investigators, it must
be admitted, vary considerably, if they are not actually diametrically opposed
to each other. Dunlap, on the other hand, has quite recently denied in toto
the possibility of establishing a specific pathological histology for dementia
praecox. He expresses himself in a recent article as being sceptical of the
pathological pictures described above; as a single instance, he demonstrates
the occurrence of 'corkscrew'-like processes not merely in dementia praecox,
but also in 'normal' brains, and in myxoedematous idiocy. Spielmeyer
declares for their non-specificity also; they are a mere accompaniment of
chronic cell atrophy from whatever cause.

This excellent review is worth more minute study than can be afforded
by any abstract of it. J. S. P.

[140] The colloidal gold curve in cases of dementia praecox (Die Goldsol-
Reaktion bei Dementia praecox).—GOLANT-RATNER. Münch. med.
Woch., 1924, lxxi, 1128.

The author of this short paper obtained a positive colloidal gold reaction in a
series of twelve cases of dementia praecox. The patients were all under
observation for a considerable time and showed typical schizophrenia, and the
diagnosis was regarded as beyond doubt. In none of the cases was there a
positive Wassermann reaction or any suspicion of syphilis. In three cases of
doubtful diagnosis (not included in the series) the colloidal gold reaction was
also doubtful.
The representative curve given is symmetrical about a line midway between the fourth and fifth tubes; these tubes, containing dilutions of 1 in 80 and 1 in 160, show the maximum change, the colour given being blue; the reaction increases from nil up to this in the first three tubes and declines again in the sixth and seventh to nil in the eighth; in dilutions beyond 1 in 1,280 there is no reaction.

As the other conditions which give a positive Lange curve are all of an inflammatory nature, the author is inclined to associate the reaction in dementia praecox with changes which are said to occur in the choroid plexus in that disease.

J. P. Martin.


This paper is a very exhaustive study of the literature relating to the investigations of the supposed Mendelian inheritance of the entity dementia praecox. The paper is prefaced by a full analytic bibliography of the subject. Chapter I. deals with the prepsychotic personality of the child in whom the characteristics of dementia praecox are larval. Chapter II. considers the way in which the various types of the disease are distributed in families.

The major part of the paper then passes on to a graphic representation of a series of genealogical trees in which endogenous defectives, psychopaths, other psychotics, schizoids, and psychical anomalies are clearly differentiated. The paper seems to illustrate that if (the italics are ours) dementia praecox be regarded as an entity which is represented as a character in the gamete in one or other of the parent stocks, this character is a recessive and inherited according to Mendelian laws. Full appreciation of this paper can be obtained only by close examination of the genealogical trees given.

E. Miller.


Attention is here called to a subject hitherto almost ignored. This degeneration was found in seven of a group of ten cases clinically diagnosed as dementia praecox; of the three in which it was not found, two were doubtful diagnoses and one was found at autopsy to be another condition. Of thirty-two cases with diagnoses other than dementia praecox, two showed acidophile degeneration; on reviewing their records it was thought that one probably was a case of dementia praecox. The cause and significance of this degeneration are at present unknown. It is possible that it may on further study furnish an anatomic criterion for the post-mortem diagnosis of dementia praecox and a guide for further investigation as to etiology.

C. S. R.


The patient was a man of sixty-three, whose symptoms had continued for ten
years. They commenced with spatial disorientation and boulimia; later, disorientation in time became equally marked, with amnesia for recent events, inattention, enfeeblement of intellectual, ratiocinative, and critical powers, variability of mood and humour, absence of initiative, akinesis. Still later, more obvious neurological symptoms made their appearance, in the form of dysphasia, dysarthria, logoelelonia, autoecholalia, palilalia, bilateral motor apraxia, muscular hypertonus, exaggeration of postural reflexes, and the presence of Westphal's paradoxical contraction.

The pathological findings were entirely typical of Alzheimer's disease and are given in detail by the authors. In addition to these, they found notable changes in the corpus striatum, both in the caudate and the lentiform nuclei, consisting in atrophy and reduction in number of both large and small cells of the ganglion, with complete degeneration of the myelinated fibres running in pencils through it.

To the latter lesions the authors attribute the patient's hypertonus, palilalia, brachybasia, attitude in flexion, and the paradoxical contraction of Westphal; the more elaborate psychical alterations are presumably allotted to the cortex.

J. S. P.


Cases of exhibitionism can be divided into two main groups: the psychopathic, and the depraved. The former includes the psychoses, the psychoneuroses, the defectives, visionaries and alcoholics.

Of fourteen cases in the psychotic group, seven were fully developed psychotics, two general paralytics, two paranoaies, two cases of dementia praecox, and one a senile dement. It is interesting to note that not one of the cases in this group suffered from epilepsy. In the author's opinion cases of exposure by epileptics are as rare as they are dramatic.

In the psychoneurotic group, many patients say that they exposed themselves on the impulse of the moment, and this may be supported by mental analysis, without confirming the irresistibility of the impulse. The absence of effort to control the impulse, of distress at giving way to it, together with the fact that imprisonment cures the condition, prevents such cases being regarded as psychoneurotics. They really belong to the depraved group. An actual case of exposure due to a psychoneurosis is given. Repeated exposure at the same place and time is regarded, not as the result of an impulse originating from within, but the reaction to a particular external stimulus which is assiduously sought.

Exposure in defectives is due largely to their inability to appreciate social convention, or contributory to masturbation, to obtain sex gratification, to excite or attract some female or child. Such individuals will repeat the act if institutional care is not adopted.

The visionary group are those who derive sexual gratification from the exposure and accompanying phantasy, which may be preceded by, or result in, erection, and is sometimes aided by masturbation. Sometimes ejaculation, with full sexual gratification, results. A parallel is drawn between
this condition and ejaculation praexx. Alcohol would appear to remove social inhibition, and thus a latent tendency to exhibitionism becomes manifest.

In the depraved group the motive in the largest number of cases (thirty-five out of forty-nine) was to attract, excite or invite some female. In other cases it was a preliminary to an attempt at carnal knowledge, and in other cases an attempt to debauch children to commit a masturbatory act on the exhibitionist. In a few cases, sadism, masochism or fetichism was associated with the exhibitionism. In one case the exposure was followed up by an indecent and violent attack on a woman. In another a man obtained intense sexual satisfaction by striking his genitals on thorn bushes so as to cause blood to flow.

The author is satisfied that as certain men sally out for the set purpose of indulging in an alcoholic debauch, so others leave home to seek an exhibitionist adventure. Medical men engaged in forensic psychiatry are counselled to exercise their judgment as free from disgust as from compassion, lest the interests of the individual on the one hand, and regard for public self-protection on the other, be obscured.

D. M.


The oral stage is concerned with libidinal and self-preservative activity as well as the fusing or diverting of primary instincts. The shortening or prolongation of suckling constitutes either a traumatic experience or a fixation, the former being, in the author’s experience, almost invariably traumatic. It is suggested that primary gratification, which normally should become subsidiary in the next stage and finally represented in the forepleasure of coitus, may abnormally retain its dominating influence and become inhibitory. This inhibitory disturbance may be quantitative, libido energy being withdrawn from one point to invest another (displacement and condensation), or to reinvest another point through regression. Ferenczi thinks that the ‘handing on’ is qualitative, the genital act being a merging of pregenital characteristics (amphimixis).

The importance of suckling to the child is described lucidly. Such factors as the odour of the maternal body and the colour and shape of breast and nipple are emphasized. The punishment of weaning, preceded by the initial slaps administered for nipple biting, together with the maternal erotic reactions to suckling, play an important part in future instinct modification.

Discussing instinct-development and object-formation, Glover traces the separation of a pleasure ego from the painful outer world by displacement of erotic tension into auto-erotic channels. Failure to differentiate a real ego causes libido to become attached to the object and a path is found for love. The path for hate is found, as it were, by misapprehension, the ‘mastery’ instincts fusing with the erotic to form the sadistic component of sexual gratification. The early confusion of subject and object causes the taking of the object into the mouth to be analogous to the introjection of objects into

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the ego. This is phylogenetically significant, the primitive belief being that food causes alteration in character. The early aggressive satisfaction of hunger causes hate to precede and find a path for love; the incorporated substance becomes a love object. This oral ambivalence may later be traced in the Oedipus situation. Other erogenous zones influence this ambivalent attitude towards objects besides influencing character formation. In ejaculatio praecox Glover noticed a marked oral disposition in addition to strong urinary interests. Displacements of oral activity, such as found in kissing and biting, are also present in the forepleasure of coitus, providing mouth-nipple parallels. In comparing oral activities with component impulses, it is observed that touch, taste, sight and smell are especially associated with the mouth, and that these senses are the instruments of projection and object-formation.

Maternal retaliations and other painful experiences help to associate pain with the erotic, this being reinforced by anal experience. The flight from incest phantasies is associated with the castration-complex. Weaning is a pre-castration disposition; the loss is associated with a part, not a whole object, as in the true castration situation. Flight reactions are important in their relation to homosexuality.

The oral subject obtains gratification in the colloquial and formal use of words. The oral sadist uses biting words and the passive type assimilates or digests. Biters and suckers may be observed in every-day life during eating, drinking or smoking. Physiognomic oral characteristics point to the instinct tendencies as they existed at the commencement of life.

Robert M. Riggall.


The motivation of normal confession is regarded by the writer as complex. He considers mutual confession between lovers to be a psychic exhibition, a mutual unveiling, and it serves to awaken common sympathy. The impulse to confess when confession is undesired and inappropriate constitutes an aggressive impulse, a lure similar to an obscene joke. To illustrate, he outlines the case of an unmarried female, age thirty-one years, who, with great detail and apparent sincerity, related a prostitution-fantasy, which followed the nursing of a sister missioner, who had been the victim of a criminal assault.

Lewis Yealland.

[147] Psychogenetics of one criminal.—Theodore Schroeder. Psycho-
analytic Rev., 1924, xii, 277.

The chief factors in the childhood of the criminal whose life-history is reviewed in this article are: a father who was a bully and a drunkard, a mother who was a strict French Presbyterian; he himself was born a weakling, and his small size and delicate appearance gave the impression that he was a girl. He did not wear boy's clothes till he was seven. The family history was bad, both as to drunkenness and crime. His father died when he was six, and his mother brought him up strictly and forced him to attend both church and
Sunday-school. Criminal tendencies appeared at the age of six or seven, and once away from the moral restrictions of his mother he entered upon a career of crime. Punishment and poverty were to him closely allied, and in the absence of proper education a career of crime seemed to be the only way to avoid both. He obtained some compensation for his feeling of inadequacy in his ability to escape detection, which he did most successfully. The presence of a strong sado-masochistic conflict is put down to his father's cruelty; the infliction was to both father and son a means of obtaining a feeling of superiority. His self-taught ability to write brought him at first honest remuneration, but soon it, too, was put to the service of crime in forgery.

His physical appearance, his sense of inferiority, and his strong attachment to his mother all tended to develop his homosexual tendencies.

The author claims that with the light that psychoanalysis has thrown on the development of the human mind it should be possible by scientific training to divert the criminal tendencies of such an individual into useful social channels.


In this paper the motive for the admission of an unconscious idea into consciousness at a particular point in a series of associations is discussed.

The writer in his psychoanalytic practice has found that, before the reproduction of a forgotten idea, in many cases an association occurs which is accompanied by a pleasurable affect. This pleasurable idea is of such a nature as to restore in anticipation the self-esteem of the subject, who must suffer pain from the subsequent reproduction of the repressed idea. This compensation has the effect of discounting the motive for repression and weakening the resistance against the painful reproduction of the idea.

In psychoanalysis the discounting of the motive in repression is often effected so radically that patients can give utterance to the most distressing ideas unaccompanied by any affect whatsoever. In schizophrenia the patients at times make use of symbolic actions and ideas, accompanied by violent affective disturbances, yet revealing the meaning of the symbolism with calm. They have, in fact, attached the affect to the symbol. The paranoic, on the other hand, protects himself against the painful unconscious idea by opposing to it a compensatory idea of a megalomaniac nature.

C. W. Forsyth.

PROGNOSIS AND TREATMENT.

[149] Remissions in general paralysis.—M. W. Raynor. Arch. of Neurol. and Psychiat., 1921, xii, 419.

Of 1,004 male general paralytics admitted to the Manhattan State Hospital during the years 1911 to 1918, 87.8 per cent. are known to have died, while thirty-three untreated patients had true remissions. Of these, seventeen preserved a complete freedom from active symptoms for four years or more, and in one case the remission lasted ten years. It may be concluded that spontaneous remissions occur in untreated cases of general paralysis, but are