ABSTRACTS

PROGNOSIS AND TREATMENT.

[64] Surgery and mental hygiene (Cirurgia e hygiene mental).—ALBERTO FARANI. Archivos Brasil. de hyg. ment., 1925, i, 37.

The value of surgery as a mental prophylactic can often be demonstrated. Since surgical infection may bring about acute mental confusion, it is evident that early intervention may simultaneously cure both and perhaps obviate a permanent and incurable psychosis. But the role of infection may be latent and manifest itself in chronic cases. Here in general it is not a question of mental confusion with which we have to deal but of melancholia, with or without hypochondriasis. It is necessary to link up the mental state with the infection in order to be able to take early measures. Retarded treatment involves the risk of a chronic persistence of the mental abnormality. The mental condition should be carefully examined to make sure that it really takes its origin from chronic infection. If not, matters may not only not get better but may be made worse. In primary melancholia any operative interference is contraindicated except when there are specially pressing indications. In persecutory states there is no probability that any good can thus accrue and the situation for the surgeon may become dangerous. In neurasthenia and hysteria one does not meet with the ordinary connection of proportional causality between the organic illness and the psychic repercussion. Traumatic epilepsy justifies early prophylactic surgical interference but in essential epilepsy such treatment is regarded as an exaggerated abuse. With regard to demential states, the author thinks that surgery may only be called for in hebephrenia, which he regards as generally due to chronic infection and derived from endocrine disturbances. He has obtained favourable results from glandular grafting. Trephining in certain cases where there have been cranial injuries is thought to be a rational prophylactic measure against the onset of dementia paralytica.

C. S. R.

[65] Mental hygiene (Hygiene mental).—HENRIQUE ROXO. Archivos Brasil. de hyg. ment., 1925, i, 1.

As syphilis and alcoholism compete with each other in furnishing the greatest number of victims to mental ailments, the preventive treatment of disease ought to be particularly directed to the increase of well organised services with the view of fighting the former evil, and to the introduction of the ‘dry law’—the only measure which is truly effective against alcoholism.

Action should be taken in regard to making psychological tests in the case of school children, and separating them in classes according to the individual capacity of each one. For each child there ought to be established a medicopsychological chart, and the same should be done later in the case of the adult, with the view of verifying whether or not he is suitable for any chosen profession. Before marriage, also, psychological examination should be made. In military service, in the examination of recruits, a remodelling of the system should be made, by which medical psychologists might be able to separate the incapable.

C. S. R.
The prevention of suicide (Da prophylaxia do suicidio).—Xavier de Oliveira. *Archivos Brasil. de hyg. ment.*, 1925, i, 75.

The author, after a brief historical survey of the subject and of the views of ancient and modern alienists, concludes that suicides are not always psychotic. He points out the pathological and general causes and draws attention to the comparative rarity of the act among mental patients who are interned. It is stated that the great coefficient of suicide in Brazil is always related to the passions. Conversely, suicide there is very rare as a consequence of financial ruin, among the well-to-do, from the increasing difficulties of life or from moral disturbances lit up by the doctrines of religious sects, except perhaps through the factor of spiritualism which of late has become more and more a factor in bringing about mental illness. It is thought that the cinema is provocative of sentimental suicide and that the authorities should have their attention drawn to this fact. The influence of exaggerated press news concerning suicide is regarded as harmful since this acts contagiously on the predisposed. Prevention should lie in (1) religious education, especially that given by catholic christianity; (2) the action of social workers who can ferret out suspects in the family milieu and take advisory measures; (3) the restriction, as much as possible, of newspaper details of suicide, forbidding the publication of names, photographs, and all letters or other documents left by suicides.

C. S. R.

The sterilization of extreme degenerates and criminals (A esterilização dos grandes degenerados e criminosos).—Renato Keihl. *Archivos Brasil. de hyg. ment.*, 1925, i, 69.

The writer is of opinion that sterilization is necessary and valuable in special cases of illness and misery; that it ought to be applied compulsorily to certain criminals, and in certain cases of grave degeneration, either mental or bodily. Once it is applied on a wide scale it should eliminate 'blastophoric' characters, or at least reduce them considerably. Used in isolated cases, however, it would not raise the degree of human perfection. Sterilization ought, therefore, to be considered as a process of eugenic value, but not as a recourse capable by itself alone of resolving the problem of the formation of a eugenic elite.

C. S. R.


The author describes the treatment by large doses of bromides of 85 patients suffering from dementia praecox, mania, involutional melancholia, etc., in the Utica State Hospital, and gives in considerable detail the histories of a number of men. The dosage was regulated in each case by the individual reaction of each patient and sometimes as much as 360 grains were given daily,
strict supervision being exercised and prompt measures adopted if stupor supervened.

Results were encouraging. Patients showing marked habit deterioration became more cleanly, less destructive and better able to care for themselves, outbreaks of violence and assault were less frequent and the patients' activities more easily directed into useful channels. Agitated, depressed patients showed less agitation and took food more willingly; some gained in weight, provided a toxic state was avoided. Manic phases, in which destructiveness, wetting and soiling were prominent features, improved, but the manic picture remained, for the most part, unaltered. Autoerotism usually responded only to prolonged treatment. Of the patients treated 75 per cent. benefited to some degree, four of them becoming well enough to leave hospital. Incidentally nursing duties and financial outlay were considerably lightened.

E. B. G. R.


Reviewing the work of numerous investigators of the treatment of general paralysis by malarial inoculation in conjunction with their own researches, the authors draw the following conclusions:

1. Malaria therapy is the best method known of treating general paralysis, and it is a safe method if proper precautions are taken.
2. Complete remissions occur in all clinical types of the disease, but are most common in (i) the expansive type, (ii) the demented type.
3. In cases which do not go on to a complete remission life is prolonged, and marked physical and mental improvement may result.
4. One attack of malaria seems to confer a partial immunity to a second infection.
5. Malaria therapy does not seem to be so successful in women as in men.
6. Among male general paralytics of the class admitted to hospitals in England, we may reasonably expect a complete remission rate of from 20 to 30 per cent.

E. B. G. R.


A comprehensive review of the literature and a discussion of both the theoretical and clinical aspects of the subject. The evidence afforded supports the administration of this method especially in early cases, the remissions obtained being decidedly encouraging. A full bibliography is given.

R. G. Gordon.
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