Few data are available relating to the subject though scattered studies have been made without any definite conclusions, and some of these are here briefly reviewed. The writers studied the proportion of cancer found among 2,627 autopsies. The cancer cases numbered 114, or 4.3 per cent. Practically all types of mental disorder were represented. The majority of the cases had been inmates for a considerable period of time. The difficulty of obtaining a satisfactory norm for the expected cancer incidence is great, and the danger of attempting to draw conclusions based on the use of proportionate mortality rates was duly appreciated. If the accuracy of available information is assumed, cancer is abnormally infrequent in the insane. This might be explained by environment, by heredity, or most likely by the relatively short life expectancy of the psychotic patient. We must at least consider the hypothesis that the soil best suited for the development of cancer differs from that in which insanity develops.

C. S. R.

PROGNOSIS AND TREATMENT


Treatment of 50 cases of general paralysis during a period of four years by the technique of diathermy has in the authors' hands produced very poor results. This is contrary to the experience of a number of other observers. During the application of the treatment considerable difficulties arose; the patients sometimes became very restless, and in two instances extensive second degree burns followed shifting of the electrodes. Convulsive seizures occasionally appeared, while marked prostration succeeded most of the treatments. No fewer than 28 patients died.

The authors give a description of the pathological findings of six cases treated by diathermy, which is a novel contribution to the subject. In each, persistent inflammation of the usual kind was seen.

J. V.

The malariotherapy of dementia praecox (Contributo alla malarioterapia della demenza precoce).—P. Varenna. Riv. sper. di fren., 1933, 57, 1.

One hundred and seven cases of dementia praecox have been treated by malarial therapy. Of these, 32 showed some improvement during the course of the treatment, which ceased when the latter came to an end. Two were
considered to be much improved, and to continue so. In all the others the method was a failure.

J. S. P.


Following a brief survey of psychotherapeutic methods in the past the writer concludes that there will be different approaches which can be utilized to advantage depending upon (1) the personality of the patient, (2) the nature of the symptoms, (3) conditions under which the symptoms were acquired, (4) the purpose they serve, (5) whether the precipitating cause continues to operate, (6) the method in which the therapist has the most confidence. There is a certain level of intelligence to which any type of analysis would probably not be applicable; other patients have an intelligence which would be offended by the cruder methods of suggestion. There are symptoms, the nature of which represents a real handicap to any other type of treatment than that of suggestion where the rational and practical approach would naturally be to clear up the symptoms and then determine and treat the cause. It is the author's feeling that those psychoneurotic conditions which have an abrupt onset are usually found in patients with a rather mediocre type of intelligence, where the outstanding symptoms, usually of a physical nature, representing a very immature way of meeting the particular life situation, can be most effectively helped by treating the symptoms by suggestion and the residual by analysis or re-education. The anxiety neuroses are invariably the result of psychic trauma which the patient experienced long before the onset of the incapacitating symptoms, and these symptoms continue after the precipitating factor has been removed. Therefore they are not amenable to the same therapeutic measures as are states of anxiety which bear, in a general way, a fairly definite relation to causal factors. 'What purpose does the neurosis serve in the life of the individual?' is a question which not only demands an answer but is helpful in the solution of the patient's problem. There is a direct relation between the ability of the psychiatrist to answer it correctly and the success of his therapy. If suggestive methods are utilized when the analytical approach would be the one of choice, it must be recognized that a substitute is being used and sometimes a poor one.

C. S. R.


The authors record the results of a survey during five years of 476 subjects, of whom 404 were completely analysed, belonging to 14 groups of various
psychoses. They describe the technique and the history of the method, and conclude that the mechanism of the therapy is the same in paresis and in non-syphilitic psychoses. This method gives positive results in about 25 per cent. of schizophrenics, 44 per cent. of manic-depressive cases, and about 10 per cent. of success in other forms of psychoses acute or chronic—inf ective, arteriosclerotic or endogenous. No results were obtained in epilepsy, post-encephalitis, stupor or amnesia. Malaria therapy is indicated in general states of psychomotor excitement. It is always inoffensive, and often gives rise to definite improvement in the general metabolism of the patient. According to the authors, malaria treatment carried out by the methods described ought to become an integral part of psychiatric practice.

R. G. G.


The patient, a woman of 32, married and childless, had suffered from typical attacks of migraine every few days since the age of 16. The outstanding symptom of this case was the fact that the attack in most cases ended after a manifest sexual orgasm. Frigidity and a heart neurosis were the only neurotic symptoms worthy of note. It is claimed that the migraine represents an attempt of the patient to 'abreact,' in a form which she can accept consciously, phantasies, which must not reach consciousness. Each time when through processes of association forbidden thoughts come to life in her subconscious, the attack comes on. The headache is a somatic portrayal of her mental conflict and of the repression taking place, and at the same time a product of self-inflicted punishment. According to the writer's experience most cases of migraine show an orgasm in masked form, for the most part during the attack itself. Analytic treatment greatly benefited the patient.

C. S. R.


The four main points of the hypothesis that the author here puts forward are:

1. The final result of psychoanalytic therapy is to enable the neurotic patient's whole mental organization, which is held in check at an infantile stage of development, to continue its progress towards a normal adult state.

2. The principal alteration consists in a qualitative modification of the patient's super-ego, from which the other alterations follow in the main automatically.
3. This modification of the patient's super-ego is brought about in a series of innumerable small steps by the agency of mutative interpretations, which are effected by the analyst in virtue of his position as object of the patient's id-impulses and as auxiliary super-ego.

4. The fact that the mutative interpretation is the ultimate operative factor in the therapeutic action of psychoanalysis does not imply the exclusion of many other procedures (such as suggestion, reassurance, abreaction, etc.) as elements in the treatment of any particular patient.

C. S. R.