Reviews and Notices of Books.


The volume opens with a eulogium of Charcot, showing how the great French clinician influenced Freud’s future work. Then follows the ‘Abreaction’ paper, written in collaboration with Breuer, which opens the field for the study of the mechanism of hysteria. The difference between organic and hysterical paralyses is discussed and the latter is defined as cortical in nature, but depending on a dissociation of a particular idea from all others in consciousness. Next attention is drawn to dissociation of affect, which Freud now comes to regard as all-important in determining ‘conversion’ hysteria, phobias, and, when the ego is altogether detached from reality owing to its incompatibility with some experience or complex, hallucinatory confusion. The description of the clinical forms and aetiology of anxiety neuroses leads him to adopt the purely sexual pathogenesis of the neuroses, although at first he allows the possibility of other causative factors, and only describes the sexual for the purposes of a short paper. His defence against the criticisms of this paper leads him to still further insistence on the sexual factor. The analyses of obsessions and phobias is the next matter for discussion. Freud defines the former as substitution phenomena analogous to hysteria, with a psychical pathogenesis, while he regards the latter as specific modifications of the anxiety neurosis, with a physical pathogenesis of frustrated sexual desire. This leads to an attack on Charcot’s insistence on the necessary basis of all the neuroses in heredity, and to a more definite exposition of his theory of aetiology depending on sexual noxae. Further discussion of defence neuroses leads to the inclusion of chronic paranoia in the category of the neuroses caused by the repressed memory of early sexual incidents.

At this period Freud had reduced the aetiology of the neuroses to a pleasing simplicity. Neurasthenia was due to masturbation which could not be given up, anxiety states to unsatisfactory methods of sexual gratification such as coitus interruptus, hysteria to accidental passive sexual experiences in early childhood, and obsessions to similar active sexual experiences. There follows a series of papers elaborating these theories and referring to, but not describing, the technique of psychoanalysis. However, by 1906, he has found it necessary to modify his theory of aetiology to a considerable extent, laying stress on the repression of the memory of sexual experiences and not on the experiences themselves. He still insists that all these memories must be sexual, but that they need not be memories of early events but rather elaborations of infantile phantasies based on an inherent autoeroticism. The volume closes with a review of the psychoanalytic movement (written in 1914), with special reference to the deflections of Adler and of Jung. In
so far as Freud claims to be the originator of psychoanalysis and therefore a chief authority on the subject, he has our sympathy, and we feel that he is right in objecting to others claiming the name psychoanalysis for different methods. But when he implies that his interpretations of the observed facts are the only possible ones, and that any one who differs from him is talking nonsense, we become less sympathetic and may suggest that the brilliant empiricism which is Freud’s great forte may not be the only philosophic method to afford valuable results.


The first twenty chapters, dating from 1906 to 1928, are elaborations and amplifications of the sexual theory whose origin and development were outlined in Vol. I. Although these are of interest, they are a little disappointing. By the true believer they will be accepted without question as coming from the hand of the master. By the scoffer they will be dismissed as a mauvaise plaisanterie, but for the friendly critic, who seeks to find common ground with other standpoints of physiology and psychology, the use of exclusive psychoanalytic terms and the attitude of protest against criticism make it difficult to adopt a sympathetic view. One is quite prepared to admit the existence of the Oedipus complex, with certain important modifications, but the dogmatic statements that its ramifications account for all sorts of behaviour, both normal and abnormal, leave one unconvinced.

The next four chapters are elaborations of a book, Das Ich und das Ed, which has not yet been translated and so it may be unfair to offer any criticisms. But one cannot help being struck by the impression that the explanation of certain phenomena, such as the difference between neuroses and psychoses, masochism and the loss of reality, in terms of the Oedipus complex, only makes for confusion and unnecessary complication. It may be, however, that, having adopted other explanations of these phenomena, one is biased; it is probably necessary to await the passage of time in order to arrive at a true conclusion. It does seem, none the less, that Freud’s related effort to do justice to the importance of the ego impulses is not tending to clarify his previous structure. The last ten chapters comprise a series of papers dating from 1910 to 1919, relating to the technique of psychoanalysis. While these give useful hints to the physician already acquainted with this method, they would be of little service to the uninitiated. The paper on the management of transference is perhaps the most serviceable of the series.


This volume consists of five cases reported more or less fully, but none of them completely. An early case of hysteria (1905), a case of obsessional neurosis, and a relapsed case of infantile neurosis were analysed by Freud himself. The analysis of a phobia in a five-year-old boy was conducted by the child’s father under Freud’s direction, and the analysis of a case of a patient with dementia paranoides, who partially recovered, was carried out from an autobiographical book published by him (the patient). The study of the infantile neurosis is undertaken in order to counter the theories of Adler and Jung after they had broken away from the ‘true’ analytic school.
After a careful perusal of these cases one must admit that one is left entirely unconvinced. This, however, does not mean that one is prepared to condemn them out of hand, for, as Freud himself says, it is practically impossible to present a clinical record of an analysis. If it were possible to present it verbatim, which it is not, it would be so verbose and incoherent that it would be unreadable; if presented more or less edited by the analyst, as is the case in this volume, it appears didactic and too much the expression of an individual opinion. The real truth of the matter is that any record of an analysis is a merely intellectual presentation and entirely lacks the affective tone which alone makes it real. Everyone who has practised this type of psychotherapy, whether as a member of the strict community or not, must know how the most surprising statements of patients bring conviction when delivered with their accompanying affect, a fact which, regarded in cold print, would be scouted as impossible. Therefore, the book is not likely to have any effect in spreading the gospel of psychoanalysis; indeed, it may rather have the opposite effect, and it will be many years before the undoubted contribution of Freud and his school can be fully evaluated, and what is of real value, be it much or little, separated from the alloy.

R. G. GORDON.

Contribution expérimentale à l'étude des fonctions du noyau caudé.


As a thesis for the doctorate Dr. Delmas-Marsalet has undertaken the re-investigation of the important question of the symptoms produced by excitation and by destruction of the basal ganglia; he has confined his attention to the caudate nucleus and has worked on dogs. By trephining in two appropriate spots on the lateral aspect of the skull he has been able to place the two poles of an electric circuit within a few millimetres of each other, in the middle of the caudate. Stimulation experiments have been conducted, and destructive lesions have been produced, uni- and bilaterally, by electrolysis.

From this experimentation the author concludes that excitation results in motor reactions which cannot be ascribed to stimulation of the neighbouring corticospinal tract. These are: (1) Rotation of the head and of the opposite side of the trunk, which is set down to a postural function; and (2) movements of mimicry and acceleration of respiratory rhythm, taken to indicate a rôle played by the caudate in the motor expression of affective states.

Unilateral destruction of the head of the caudate is followed by (1) transient crossed hemiparesis; (2) incurvation of the neck and trunk on the same side, temporary or permanent; (3) 'circus' movements, of which some are stated to be postural, and others forced movements of a peduncular or cerebellar kind; (4) crossed disorder of the muscular sense shown by loss of the sense of position of the limbs, especially when at rest; (5) a certain degree of loss of motor activity and spontaneity. In no unilateral case was tremor, chorea, or athetosis observable.