

Particularly interesting is the evidence for Poe's various love adventures, having been a search for a mother substitute of the particular type to which his mother belonged. This number of *L'Hygiène Mentale* is devoted to pathography, and this article forms an interesting pair with Prof. Wigert's communication on the same subject.

W. MCC. HARROWES.

*Psychopathological Analysis of Optic-agnostic Disturbances* [Beitrag zur psychopathologischen Analyse der optischagnostischen Störungen]. (*Arch. für Psychiat.*, vol. xcix, p. 197, 1933.) Last, S. L.

The writer describes two cases with optic agnosia for objects and their pictures. One of them suffered from a senile psychosis, whose symptoms varied in the same way as the agnostic symptoms, and were as dependent on psychological factors as the latter. The author studied the mental processes involved in recognition, and the factors to which errors can be ascribed. One of the most important of these is the meaning which the patient attaches to the object or picture shown to him. This assumed meaning might facilitate or (if wrong) hinder or preclude recognition. It is pointed out that facial expression is understood remarkably well by patients who show inability to analyse parts of a face, and he compares it to the early acquired understanding of facial expression by children. The writer is opposed to the view held by certain German workers that agnosia is due to lability of the sensory threshold.

R. STRÖM-OLSEN.

*The Psycho-analysis of the Drawings of Psychotic Patients* [A psicanálise dos desenhos dos psicopatas]. (*Revista da Assoc. Paulista de Med.*, vol. iii, p. 175, Oct., 1933.) Marcondes, D.

A psychosis should be regarded as the expression of a struggle between the impulses of the individual and the limitations imposed upon them by reality. The Freudian conception of dreams and of neuroses may be applied to a new field. The idea of the unity of mental life allows us to study the manifestations common to artists and psychotic patients. In both cases we have a vicarious satisfaction of primitive impulses which are unacceptable to the conscious mind. There is also an accentuated subjectivism; in patient and artist there is a renunciation of the satisfaction of the primitive impulses so far as the world of reality is concerned; both make their escape from reality by means of phantasy. The author inclines to Jung's views on the interpretation of dreams and drawings, and discusses the importance of masculine and feminine symbols as indicated in pictorial productions. The article is illustrated by reproductions of patients' drawings.

M. HAMBLIN SMITH.

*The Relation of Perversion-Formation to the Development of Reality-Sense.* (*Int. Journ. of Psycho-anal.*, vol. xiv, p. 486, Oct., 1933.) Glover, E.

While it is true that some perversions are the negative of a neurosis, others are found to be a symptomatic formation in obverse of a psychosis or transitional psychosis. It is suggested that the perversions form a developmental series running parallel to the neuroses and psychoses, and that they reflect stages of overcoming anxiety regarding the individual's own body or external objects by excessive libidinalization. In the perversions the amount of reality-sense already achieved is preserved at the expense of freedom in adult libidinal function. On the contrary, in neuroses a degree of freedom of adult libidinal function is allowed at the cost of some inhibition of reality relations. In the psychoses there is gross disturbance of reality-sense, often associated with apparent freedom of adult libidinal function.

S. M. COLEMAN.

*An Analysis of the Neuroses of Identical Twins.* (*Psycho-analytic Review*, vol. xx, p. 375, Oct., 1933.) Cronin, H. C.

Two brothers, identical twins, aged 23, complained of anxiety, which, in their opinion, was connected with the threatened loss of a mutual love-object, the wife

of one and paramour of the other. Both men showed a preponderance of early and late ambivalent anal qualities, and a few early oral traits. The married brother's conflicts were centred about auto-eroticism, with associated feelings of inferiority. His brother, more markedly maladapted, was found to be fixed in auto-eroticism, homo-sexuality and incest. He took as love-objects a series of mother-substitutes, including two of his sisters-in-law. An analysis of all three persons concerned, extending over two years, resulted in a satisfactory readjustment.

S. M. COLEMAN.

*Basis for a Psycho-analytical Study on the Marquis de Sade* [*Éléments d'une étude psychanalytique sur le Marquis de Sade*]. (*Rev. Franç. de Psychanal.*, vol. vi, p. 458, 1933.) Klossowski, Pierre.

A psycho-analytical investigation of de Sade demonstrates that his abnormal personality was the result of a negative oedipus complex. Instead of inhibition of the incest motive as a result of castration fear, there is regret for ever having desired to sacrifice the father for the mother. In phantasy and in conduct de Sade identifies himself with the father, in order to turn all his aggressive impulses upon the mother.

S. M. COLEMAN.

*The Anal Component in Persecutory Delusions.* (*Psycho-analytic Review*, vol. xxi, p. 75, Jan., 1934.) Bender, L.

Observations on two women suffering from paranoid delusions, with ideas of being attacked from behind, support the view that the persecutor may be a symbolization of parts of the individual's own body. It seems that it is especially the anal region and fæces that lend themselves most readily to separation from the other parts of the body, but some narcissistic attachment always remains, the persecutor never being completely divided from the body of the persecuted.

S. M. COLEMAN.

### 3. Psychiatry.

*Hallucinations* [*Über Halluzinationen*]. (*Der Nervenarzt*, vol. vi, p. 561, Nov., 1933.) Schröder, P.

The author stresses the fact that direct stimulation of the cortex of the brain gives rise to sensations which are entirely different from the hallucinations of psychotic patients. He denies that we have any reason to assume a connection between some areas of the cortex and hallucinations. He thinks that much mischief is done by collecting a group of different phenomena under the one heading of hallucinations, and attempting to find one mechanism for all of them.

The author proposes the following classification of clinical "complexes with hallucinatory phenomena" after having omitted the cortical sensory symptoms in brain diseases (e.g. photoma): (1) The hallucinations of the delirious, together with dreams and day-dreams, etc.; (2) the *illusions*, due to delusions of reference, and connected with the misunderstanding and the misinterpreting of the normal; (3) the *hallucinations* proper, as the hearing of voices in cases of "Gedankenlautwerden" (thoughts becoming audible); this should be considered as forming either a part or a result of the psychotic symptom. His thoughts and acts seem extraneous to the patient. (4) The phantasy formation ("Phantasieren") in paraphrenia phantastica and similar paranoid diseases.

The combination of several of these complexes is of common occurrence, e.g., the combination of (1) and (3) in alcoholic delirium.

S. L. LAST.

*Some Psychiatric Aspects of Suicide.* (*Psychiat. Quart.*, vol. vii, p. 211, April, 1933.) Jameison, G. R., and Wall, J. H.

The authors give notes on twenty-five institutional suicides in their own experience. They point out that the frequent contact of the physician with his patient