

develop; signs of neuritis were absent. Physical signs of general paralysis were present, and he died in convulsions after a year's residence in the asylum. *Post-mortem* his brain showed the lesions of general paralysis with, on the left side, a zone of interstitial hæmorrhage limited to the grey matter of the cortex of the external occipital convolutions.

W. STARKEY.

Automatic Parricidal Impulse in Puberty [*Impulso automatico al parricidio nell'epoca pubere*]. (*Ann. di Freniat.*, vol. *xxi*, fasc. 3, Sept., 1911.) Marro.

The observation recorded in this paper is of some criminological interest. The patient to whom it refers was a youth between sixteen and seventeen years of age, the son of an alcoholic father, but otherwise without special hereditary taint. When nine years old he had a severe head injury, which left a depression over the upper parietal region on the right side. After this accident the boy complained constantly of sensations of heat in the head, and he was noticed to be a good deal slower at his lessons. With the onset of puberty he became subject to periodical headaches, and he also contracted the habit of masturbation. One morning, while engaged in helping his mother in the household work, he suddenly threw a slip-noose over her head, dragged her to the ground and tried to strangle her. After a struggle lasting nearly a quarter of an hour he became quieter, sighed deeply two or three times, got very flushed in the face, went on his knees and said, "Mother, forgive me; I don't know why I did it." He then ran away, and was found some hours later in the fields. When questioned about the affair he said that the idea of the crime came into his head quite suddenly two days before. To get it out of his mind he went to a cinematograph, and was free from the obsession for a time. It recurred, however, and early in the morning of the day of the attempt he heard a voice telling him to strangle his mother with a noose, to take her money and go to the gaming-house with it. At the same time he saw a sheet of paper before his eyes with the same exhortation printed on it. The idea continued to beset him till he made the attempt. The boy was not specially fond of gambling, and he had some money of his own at this time. Discussing the case, Marro points out that the clearness of consciousness excludes the hypothesis of epileptic automatism, which might be suggested in view of the head injury and the periodic headaches. The influence of alcohol could also be ruled out. In the absence of any indications of more persistent mental disorder, the author concludes that the impulsive automatism shown by the patient was an exaggerated manifestation of the physiological instability of puberty, and he considers, therefore, that the prognosis of the case should be favourable.

W. C. SULLIVAN.

Studies on the Circulation of the Blood in the Insane [*Études sur la Circulation Sanguine des Aliénés*]. (*Bull. de la Soc. Med. de Belgique*, April, 1911.) De Somer, E.

This article is a preliminary communication on the influence which rest in bed exercises on the splanchnic vessels and also on the heart's

action. The observations are based on the changes in the three different ways which occur in the ordinary pulse-tracing, *viz.*, (1) the pulse wave; (2) the respiratory wave; (3) a wave which occurs after every five or more beats. This latter wave is the one to which importance is to be attached. It is feebly marked in healthy people, but increases in intensity in proportion to the state of dementia. There is reason to believe that this wave is a manifestation of the reactions depending on psychical activity, and has its origin in a regularly alternating cyclical contraction and dilatation of the central circulatory system.

Three cases are given with considerable detail, together with a description of the blood-waves and blood-pressure in each case.

In the case of dementia præcox there was peripheral vaso-dilatation with congested extremities. The pathogenesis of this is central in origin. After rest in bed the pulse diminishes in frequency and volume, dicrotism is less marked, and the third wave almost disappears.

In a second case with excitement it was found that rest in bed increased the dicrotism and the tension, but the third wave disappeared. In another case of dementia rest in bed greatly increased the pulse tension and tendency to dicrotism, but the third wave, which was present before bed treatment once in every twenty-three heart-beats, was found to be absent.

The writer says there is a constant relationship between the form, frequency, volume, and pressure of the pulse and the third wave. The third wave appears with any psychical activity or only a simple effort.

COLIN MCDOWALL.

A Comparison of Personal Characteristics in Dementia Præcox and Manic-depressive Psychosis. (*Amer. Journ. of Ins., Jan., 1912.*)
Bond, E. D., and Abbot, E. S.

This research consists of a study of the personal characters of a number of cases of dementia præcox and manic-depressive insanity in the pre-psychotic period. It was undertaken to test the validity of those observers who have laid especial stress on the constitutional make-up as a factor in the development of the psychoses. Fifty definite examples of each psychosis were chosen, and a careful analysis made of the mental traits existing before the onset of the disorder.

The writers arrive at the following conclusions:

- (1) Normal traits predominate in manic-depressive psychoses.
- (2) Abnormal traits are found in about an equal proportion in dementia præcox and manic-depressive psychosis.
- (3) Certain abnormal traits—reticence, peculiarity, precocity—are found more in dementia præcox than in manic-depressive insanity.
- (4) Normal personalities are found fairly frequently in both diseases, but more frequently in manic-depressive psychosis.
- (5) Abnormal personalities are much more frequent in dementia præcox.
- (6) The "shut-in personality" is found almost exclusively in dementia præcox.
- (7) If all doubtful and abnormal personalities are conceded to predispose to dementia præcox, on the one hand not more than half of