

thyroid was given. The tests at the level of mentation were three in number: the simple reaction time, the giving of as many nouns beginning with a stated letter as possible in one minute, and the sorting of parti-coloured cards. Indirect methods of measurement were also used, *i.e.*, the recording of the weight, temperature, blood-pressure, etc. The tests at the level of mentation gave the best correlations with the behaviour chart. The indirect tests gave less close correlation, the results being influenced by the drug.

M. HAMBLIN SMITH.

*Intelligence Tests for General Paralytics* [*L'Examen du fonds mental des paralytiques généraux par la méthode des tests*]. (*Ann. Méd. Psych.*, vol. xiv (ii), p. 173, July, 1933.) Claude, M., et Masquin, P.

The writers are convinced of the importance of gauging more accurately the degree of intellectual recuperation following malarial therapy. With this idea in mind they have elaborated a series of intelligence tests to be used in conjunction with the usual clinical examination of paralytics before and after treatment. These tests take about forty minutes to perform, are easily workable, and impersonal; it is stated that they are not rendered inaccurate by the educational culture or profession of the subject. The writers prefer to study successively the different faculties rather than to speak of regression to such or such an age.

STANLEY M. COLEMAN.

*Familial Presenile Dementia with Spastic Paralysis.* (*Journ. of Neur. and Psychopathol.*, vol. xiv, p. 27, July, 1933.) Worster-Drought, C., Hill, T. R., and McMenemey, W. H.

The author describes a case which resembled Pick's disease, but in which there was a definite and extensive family history. It also differed from Pick's disease in the early development of spasticity of the limbs and the degree of dysarthria. In the actual patient described there was muscular rigidity of an extrapyramidal type, and in the relatives the paralysis affected all four limbs. The case described also could be said to resemble Jakob's pseudo-sclerosis in the muscular rigidity, dysarthria and mental changes, but differed from this latter disorder in the absence of tremor and spontaneous movements.

G. W. T. H. FLEMING.

*Regression in Manic-Depressive Reactions.* (*Psychiat. Quart.*, vol. vii, p. 386, July, 1933.) Witzel, A. E.

The general goal of regression is towards a negation of life-death in the depressed, and towards a beginning of life anew in the manic. In many of these states there is a regression to a state of narcissism. The writer emphasizes that no patient should be regarded as hopeless because of the apparent profundity of the regression. The presence of marked preoccupation with somatic complaints and the free use of the mechanism of projection carry with them a guarded prognosis. Where suicidal attempts occur as the result of alleged persecutions the adjustment, if any, which takes place is usually an unstable one. In the age-periods 50-60 the apparent lack of incentive to get well seems more marked. In some cases the marital state appeared to be an obstacle which could not be satisfactorily dealt with.

G. W. T. H. FLEMING.

*Precipitating Factors in Manic-Depressive Psychoses.* (*Psychiat. Quart.*, vol. vii, p. 411, July, 1933.) Travis, J. H.

The author reviews a series of 70 cases, 53 female and 17 male. He found that the precipitating factor was closely related to marital maladjustment in some form in a great majority of the cases, and that in most there were ever present inflammable complexes in the unconscious waiting to be ignited by the proper precipitating factor.

G. W. T. H. FLEMING.