other times the exaggeration may be unconscious. These cases, he says, are, as a rule, schizophrenics, who give the impression of simulation on account of their incoherent, paradoxical and irrelevant replies. He mentions the Ganser syndrome as a feature likely to lead to suspicion; indeed, unless the examiner possesses a knowledge of this reaction, the effect is undoubtedly to give an impression of foolish simulation.

The author, however, takes note of the simulation of the psychopath, which is extremely frequent and very difficult to unravel.

Essentially the whole article is a plea for careful examination of suspected persons without preconceived diagnosis.

The article is followed by a discussion. W. McC. HARROWES.

Late Periodic Psychoses. (Gaz. des Hôp., May 23, 1931.) Anglade, Roger.

The chief interest of this communication lies in the study of late developing depressions and maniacal excitements. The author stresses a biological difference and a clinical dissimilarity between presenile melancholia and the melancholic spells of manic-depressive insanity. In presenile melancholia the phenomena of cerebral arterio-sclerosis and a progression towards dementia are most prominent. Late mania is rarer and is frequently associated with paranoid features and gross organic disturbances; consequently the author feels that this mania cannot readily be included in the group of manic-depressive conditions.

The author points out also that *folie circulaire* may begin late in life, and here the manic-depressive swing is rapid, the progression to dementia is quick and the heredity is usually definite.

The author concludes by pointing out that late psychoses are very frequently associated with organic disturbances.

This report is followed by a discussion. Prof. Claude found himself in agreement with the author, and laid stress on the frequently discovered organic basis of late psychoses, and stated that in such cases the prognosis was serious. W. McC. Harrowes.

Schizophrenia and Cerebral Tumour. (Ann. Méd. Psych., January, 1931.) Claude, H., and Baruk, H.

Two previous papers are referred to in which the authors described psychotic states in association with cerebral tumours. There then follows the description of a schizophrenic who died at the age of 32, autopsy revealing an extensive glioma of the left temporal lobe, involving the speech centre of Wernicke. There had been no localizing symptoms or aphasia. The history showed a gradual onset of schizophrenic manifestations over ten years, following a schizoid adolescence.

S. M. Coleman.

Disturbances of Character at the Onset of Dementia Præcox. (Ann. Méd. Psych., July, 1930.) Heuyer, G., and Serin, Mlle.

The authors describe seven cases in support of the view that the onset of dementia præcox usually occurs at about the time of

puberty with a transformation of character, in an individual with a perfectly normal childhood. They cite affective disturbances, indifference, hostility and asocialism as the main features. A valuable section of the paper is devoted to the character abnormalities of moral perverts, epileptics, post-encephalitics and cyclothymics with their differential diagnosis. A final section is devoted to pathogenesis. They dismiss the psycho-analytical theory, Kretschmer's theory of character types and Bleuler's theory of autism in short paragraphs, admitting, however, that it is not yet possible to give satisfactory proof of the infective or toxic origin of the disease.

S. M. COLEMAN.

Clinical Study of Presentile Melancholic Dementia. (Ann. Med. Psych., May, 1930.) Halberstadt.

The writer describes three cases representative of a special form of presenile insanity. The condition has a sudden onset between the ages of 40 and 45. The initial melancholic syndrome is associated with stereotypy and mannerisms, and is invariably followed by a rapid and progressive dementia, in which, however, traces of the original affective state are preserved.

S. M. COLEMAN.

The Mirror Sign in the Psychoses, and more especially in Dementia Præcox. (Ann. Méd. Psych., January, 1930.) Abely, Paul.

By specific inquiry when history taking, by personal observation and by the experiment of distributing mirrors among a group of suitable cases, the writer has come to the conclusion that certain psychotics show a morbid degree of interest in gazing at themselves in a reflecting surface. He finds the sign in many psychoses, but of most value in the prodromal stage of dementia præcox, when it is usually associated with soliloquy and autistic thinking. The phenomenon is explained on Freudian principles.

S. M. COLEMAN.

Symptomatic Dementia Præcox in Encephalitics. (Ann. Méd. Psych., June, 1930.) Marchand, L.

A clinical and histological report of seven cases of dementia præcox, in whom an autopsy had been performed 11 months, 1, 3, 4, 7, 11 and 17 years after the onset of the disease. In each case there was evidence of cortical or meningo-cortical inflammation. All showed the presence of satellite cells in the deeper cortical layers and of perivascular infiltration, while in some there had been infiltration of the pia mater with embryonic cells. The writer concludes that in at least a proportion of cases of dementia præcox, the degeneration changes in the cortical neurons are preceded by an inflammatory process.

S. M. Coleman.

Encephalographic Studies in Cryptogenic Epilepsy. (Arch. of Neur. and Psychiat., July, 1931.) Notkin, J.

The author points out that a dilated ventricle and a large accumulation of air in the subarachnoid spaces in a roentgenogram must