

animal; and they varied from animal to animal, even in the same species. The order of preference was, roughly, as set out above. But the preferential series for each animal showed a "serial principle"; that is, if food A is preferred to food B, which in turn is preferred to food C, then food C is never preferred to food A.

M. HAMBLIN SMITH.

A Preliminary Experiment on Abstraction in a Monkey. (*Journ. Comp. Psychol.*, vol. xvi, p. 321, Oct., 1933.) Robinson, E. W.

The term "abstraction" may be used to cover situations in which an individual learns to respond to some specific stimuli to the exclusion of others. An experimental situation was devised in which the subject could respond correctly only by observing the whole set-up, and choosing on the basis of the relation which the correct element bore to the whole. A *Macacus* monkey learned to respond by choosing the one box of three which was different to the others. The experiment is, at present, only preliminary.

M. HAMBLIN SMITH.

3. Psychiatry.

Social and Moral Factors in Psychiatry. (*Brit. Journ. Med. Psych.*, vol. xiii, Oct., 1933.) Davies, Arthur Ernest.

The author suggests that some aspects of psychiatric practice would be considerably improved if it supplemented the structural method by the genetic method of the social and moral sciences. An inquiry is made into the nature of social facts and into the relations of the individual to society. From this it is concluded that a healthy social life for the community as for its constituent members involves relations of two types: the "personal", which are those relations which are determined by the organic structure of a society, and which are fundamental to its being and remaining what it is; and the "individual", which are those which are or appear to be in contravention of the conventional requirements embodied in social tradition. There is nothing in these relations themselves that justifies anyone subordinating the one to the other.

The nature of moral facts is inquired into dialectically. The general objection of the artificiality of the moral problem is disposed of. The development of the conception of morals out of tradition is traced, morality being defined as that aspect of the actual which fulfils a human purpose. If morality is understood in the sense of sociality, the psychiatrist's attempt to deal with the moral aspects of disease issues practically in the denial to his patient of the rights of a moral individual. Society is the medium in which tradition develops. Social organizations of every kind have, for those who belong to them, an instrumental value, and are therefore moral institutions. Socialization is effected by imitation. Custom keeps in being the machinery of the moral life, but the moral purposes of particular communities require new modes of behaviour for their fuller expression.

The psychiatric theory of mental life is examined to ascertain if it affords the basis of an adequate psychological explanation of social and moral facts. The intentional character of the affective-conative tendencies is emphasized. The cognitive factor in instinct is discussed, and it is premised that, excepting the reflexes, there are no purely anoetic experiences. Empathy is shown to be the outcome of gregariousness, and imitation the link between the latter and sociality. Personality is not a datum, but an achievement; disturbances of personality involve the moral life. Altruism, sympathy and the moral ideal are briefly discussed. Sympathy is not the cause, but the universal accompaniment of moral behaviour.

Jung says that the object of analysis is the patient's moral autonomy. In view of the preceding discussion, if it be deemed wise to attempt to achieve such a result—a proceeding fraught with danger—in the majority of patients, no good can come from the employment of honorific terms in psychiatry. Until the field of social pathology has been explored further by psychiatrists, to attempt to lead the mentally disturbed to take a moral position denied not only to, but by, the majority of the normal population would be to invite disaster.

JOHN D. W. PEARCE.

The Vestibular Apparatus in Neurosis and Psychosis. (*Journ. of Nerv. and Ment. Dis.*, vol. lxxvii, pp. 1 and 137, July and Aug., 1933.) Schilder, P.

The author gives a very lengthy and complete survey of the vestibular apparatus. He points out that the symptoms which occur in organic lesions of the vestibular apparatus are :

1. A vestibular influence on the visual field—darkening of the visual field, narrowing of the visual field and scintillation. There is a difference between peripheral and central lesions.
2. There is a multiplicity of apparent movements which are only partially dependent on the nystactic movements of the eyes.
3. The perception of direction can be changed by vestibular lesions, and transformations from one plane to another may take place.
4. Micropsia, polyopia may occur. These changes can be unilateral in central lesions, and are homolateral to the side of the lesion.
5. The haptic sphere is changed by vestibular lesions.
6. Homolateral weakness, homolateral impairment of sensibility and changes in tone and in reaction movements.
7. Under vestibular influence a part of the substance of the body may be dissociated from the rest of the body.
8. Changes in the vegetative system and in consciousness.

Optic images, tactile images, tactile and optic eidetic pictures can be influenced by vestibular irritation in a similar way as after-images. In hallucinations vestibular influences change the appearance and add movements to the picture. Multiplicity of hallucinations, macropsia, micropsia and dysmetamorphopsia indicate a vestibular influence on hallucinations. The author describes a case of barbital intoxication and a case of eclamptic psychosis.

Dysfunction of the vestibular apparatus is very often the expression of two conflicting psychic tendencies. Dizziness may occur in almost any neurosis.

G. W. T. H. FLEMING.

The Investigation of a Specific Amnesia. (*Brit. Journ. of Med. Psychol.*, vol. xiii, p. 143, Sept., 1933.) Erickson, Milton H.

In this paper a full account is given of the possible methods of investigating a specific amnesia without any accessory information. The following techniques were used: free association, hypnosis, automatic writing, crystal gazing and dream analysis. A hypothetical third level of consciousness was reached, and whilst in this state automatic writing was obtained, leading to the discovery of the forgotten material. This did not give the subject of the investigation full relief, until an underlying emotional conflict was dealt with.

F. H. HEALEY.

Mensuration in the Psychoses. (*Amer. Journ. Psychiat.*, vol. xiii, p. 151, July, 1933.) Cameron, D. E.

Six cases of depression were investigated over a period of 56 days, being tested every second day. At the end of the first eight days veronal was administered for 16 days, followed by a clear period of 8 days, and then 16 days, during which