

author to claim that the condition is a special involitional form of chronic hallucinatory psychosis. According to him the notable features are the age of the patients; the absence of psychopathic antecedents; the good physical condition, apart from arteriosclerosis; the absence of psycho-motor hallucinations and echo of the thought; and lastly the absence of mental enfeeblement.

W. D. CHAMBERS.

*Traumatic Stupor, Etherization, Recovery* [*Stupeur Traumatique, Éthérisation, Quérison*]. (*L'Encéph.*, January, 1927.) Brailowsky, V.

The case of a man, æt. 30, who, after being tried for the theft of some money, passed suddenly into a state of complete stupor. When this had lasted twenty days light ether anæsthesia was induced up to the stage of excitement, in which the stupor suddenly disappeared and the man appeared to be normal.

W. D. CHAMBERS.

*Confusional Mania* [*La Manie Confuse*]. (*L'Encéph.*, September-October, 1926.) Lautier, F.

The author points out the apparent contradiction in the nomenclature of this condition, and after describing three cases, emphasizes the points of distinction between true mania, confused states accompanied by manic excitement, and typical confusional states.

W. D. CHAMBERS.

*A Case of Juvenile Mythomania* [*Un Cas de Mythomanie Juvenile*]. (*Fourn. Neur. et Psychiat.*, July, 1926.) Vermeylen, G.

This paper is a full account of pathological confabulation in a youth æt. 17, followed by a discussion of the views of Dupré on the distinctions between this morbid condition and the normal childish, playful "make-believe."

W. D. CHAMBERS.

*Hallucinatory Psychosis in a General Paralytic* [*Délire Hallucinatoire chez une Paralytique Générale*]. (*Fourn. Neur. et Psychiat.*, July, 1926.) Vermeylen, G.

An account of a case of general paralysis in a woman, æt. 59, of eighteen months' duration, in which highly organized auditory hallucinations with delusional interpretations were the prominent clinical symptom. The rarity of this symptom in general paralysis is discussed. At the time of writing the progress of dementia has broken up the clinical picture, and treatment by malarial infection being about to begin, the author speculates as to whether the hallucinosis will return if an intermission of the paralytic process takes place.

W. D. CHAMBERS.

*A Case of Communicated Insanity* [*Un Cas de Folie à Deux*]. (*Fourn. Neur. et Psychiat.*, July, 1926.) Hoven, H.

After a short review of the literature on the subject, the author records the simultaneous development of a polymorphic delusional

psychosis in two elderly sisters. Unlike most cases, in this instance both sisters seemed active subjects, and neither dominated the other, but the delusional content and symptoms were practically identical.

W. D. CHAMBERS.

*Hysterical Contractions of the External Muscles of the Eye* [*Les Contractures Hystériques des Muscles Extérieures de l'Œil*]. (*L'Encéph.*, March, 1926.) Balduzzi, O.

Such contractures are quite common temporarily, but are rarely of long duration, and the few prolonged cases which have been recorded are quoted by the author. He describes the case of a young woman, a "grande hystérique," which he observed himself, in which internal strabismus with diplopia followed the hysterical attacks.

W. D. CHAMBERS.

*Chronic Hallucinatory Psychosis with Delusional Interpretations in a Diabetic suffering from Hypertrichosis* [*Psychose Hallucinatoire Chronique avec Interprétations Délirantes chez une Diabétique Hypertrichosique*]. (*L'Encéph.*, March, 1926.) Laignel-Lavastine and Valence.

The authors describe an interesting case in which the delusions varied according to the amount of glycosuria. After typhoid fever sugar disappeared from the urine for seven months, and during this period the mental state was nearly normal. The case supports the theory of Cherambault that chronic hallucinatory psychosis is always of organic origin. The patient (a woman) had a marked hypertrichosis of masculine type—an accompaniment of diabetes which one of the authors has seen frequently.

W. D. CHAMBERS.

*Obsessional Fugues and Epidemic Encephalitis* [*Fugues Obsédantes et Encéphalite Épidémique*]. (*L'Encéph.*, March, 1926.) Dupouy, R., and Hyvert, M.

This is the case of a man, æt. 25, who had epidemic encephalitis in 1920 and has since suffered six fugues. The authors point out that if these fugues can be caused by the lesions of encephalitis in this case they may be equally due to other organic causes in other cases.

W. D. CHAMBERS.

*Interpretative Psychosis of Emotive Origin. The Prognosis in these Interpretative States* [*Psychose Interpretative d'Origine Émotive. Du Prognostic de ces États Interpretatifs*]. (*L'Encéph.*, March, 1926.) Tinel, J., Robin, G., and Cénac, M.

The paper describes the case of a man, æt. 36, constitutionally emotional, but with no previous disorder of conduct, who fled from home in a state of terror caused by delusions of sudden onset. He had detected a group of colleagues in a system of thefts, and was in fact assaulted by some of them, and a few days later he imagined himself the object of a conspiracy and in constant danger, his delusions supported by morbid interpretations. The authors discuss