

up self-respect, organizing good habits and a feeling of adequacy, rendering it not only possible but attractive to attain a level of mature responsibility—truly a stupendous task.

G. W. T. H. FLEMING.

New York Narcotic Drug Survey. (*Med.-Legal Journ.*, March-April, 1930.) Herzog, A. W.

The case-histories of 433 men and 117 women are analysed. Physical pain and mental stress were the primary causes in 13%, and bad associations in 24%. The vast majority of the addicts were of the white races. Married and single persons were represented in almost equal proportions. Heroin addiction comprised more than 59% of the cases. The majority ranged from 21 to 35 years of age. The average addict purchases from 4 to 25 shillings-worth of drug daily. The method of gradual reduction was applied in all cases, the prescribed period of treatment being three weeks.

M. HAMBLIN SMITH.

The Possible Liability of Physicians in Cases of Attempted Suicide. (*Med.-Legal Journ.*, March-April, 1930.) Herzog, A. W.

If a sane man is attempting suicide, would another person who interfered be guilty of a technical assault, or be civilly liable for any injuries which the would-be suicide might sustain? The question appears to depend upon whether an attempt at suicide is an offence under the laws of the particular jurisdiction under which it occurred. If it is not an offence, a physician, or any other person who interfered, would be criminally and civilly liable.

M. HAMBLIN SMITH.

Partial Insanity and Criminal Intent. (*Med.-Legal Journ.*, May-August, 1930.) Weihofen, H.

The New York Court of Appeals has recently laid it down that "febleness of mind or will, not so extreme as to justify a finding that the defendant is irresponsible, may properly be considered in determining whether a homicide has been committed with a deliberate and premeditated design to kill, and thus may be effective to reduce the grade of the offence." If generally adopted, this dictum would revolutionize the legal system. It would have, in practice, to be combined with arrangements for the treatment as well as the punishment of "partially insane" offenders, and such treatment would have to be continued after the expiration of the formal sentence of imprisonment.

M. HAMBLIN SMITH.

4. Pathology.

The Physiopathological Significance of the Meningeal Permeability. (*Amer. Journ. Psychiat.*, September, 1930.) Katzenelbogen, S.

"Meningeal permeability" is selective towards substances introduced into the general circulation; there is no obstacle to

the passage in the opposite direction. The choroid plexuses, ependyma, neuroglia, cerebro-spinal vessels and leptomeninges are the main anatomical constituents of the "barrier." There is reliable evidence that the barrier acts as a dialysing membrane. Any functional disorder resulting in either increase or decrease of the permeability has an ill effect upon the nervous system. The problem is of importance from the point of view of intra-spinal treatment, and of measures aiming to increase the permeability. Among the latter, pyretotherapy is recommended. But the problem requires further investigation.

M. HAMBLIN SMITH.

The Permeability of the Hæmato-Encephalic Barrier as Determined by the Bromide Method. (*Arch. of Neur. and Psychiat.*, October, 1930.) Gordy, S. T., and Smith, S. M.

The authors examined 183 patients at the Philadelphia Hospital for Mental Disease by Walter's bromide method. In general paralysis the majority of cases showed a marked increase in meningeal permeability. In dementia præcox the majority of patients showed a normal figure, about 24% showed increased permeability and 7% diminished permeability. In cases of chronic alcoholic psychosis there was a tendency towards increased permeability. A similar tendency is shown in some degree in psychoses with cerebral arterio-sclerosis. Half of the cases of manic-depressive psychosis showed increased permeability. In post-encephalitic cases and in senile psychosis there were no abnormal tendencies.

G. W. T. H. FLEMING.

Barrier between the Blood and Cerebro-spinal Fluid. III: Distribution Ratio of Bromides in Schizophrenias. (*Arch. of Neur. and Psychiat.*, August, 1930.) Malamud, W., and Rothschild, D.

The authors investigated 210 cases. They found that in schizophrenia uncomplicated by somatic diseases, 60% of the cases showed ratios above 3.2 (up to 4.3), 38% ratios between 2.8 and 3.2, and 2% below 2.8. Active tuberculosis, cerebral arterio-sclerosis, acute infections and reaction to typhoid inoculation tended to increase the passage of bromides into the spinal fluid (*i.e.*, to decrease the ratio). There was no definite relationship between the distribution ratio and the type of schizophrenia as usually described. A large proportion of the cases with ratios between 2.8 and 3.2 ran acute courses with remissions. The few cases with a ratio below 2.8 showed passive decompensating types of schizophrenic processes.

G. W. T. H. FLEMING.

Galactose Tolerance in Dementia Præcox. (*Arch. of Neur. and Psychiat.*, September, 1930.) Sleeper, F. H., and Hoskins, R. G.

The authors determined the galactose tolerance in 135 male cases of dementia præcox. They found some variability in those