

of insanity. Similar cases may occur at other times of life and present the same clinical picture. The definite form of insanity of the menopause "with its special facies" is, says Dr. Mercier, rare. Senile insanity has no right to a special place in nosology. "The term means, it appears, insanity not assigned to any distinct category except by its occurrence in advanced age. It would, in my opinion, be unreasonable to base the differentia of the disease on so slender a foundation." The insanity of epilepsy is admitted to have "a good title to the denomination of a disease." Cases of insanity associated with bodily diseases, whether the latter be regarded as a cause

or not, in no case present a clinical picture of sufficient distinctness to entitle them to separate rank as diseases. Dr. Mercier would admit the claims of a stupor, paranoia, recurrent and alternating insanity, and the two forms of insanity occurring in adolescents or young adults known as hebephrenia and katatonia. Causes of fixed delusion would also find a place in classification, being further subdivided as the delusions are persecutory, exalted, and personal. Alcoholic insanity would be recognised in its subdivisions of *mania a potu*, delirium tremens (acute forms), or alcoholic insanity proper of the chronic form. This threefold subdivision of alcoholic insanity

would exclude all cases in which alcohol was not the main actuating cause of the malady. The above-named varieties of insanity, concluded Dr. Mercier, "have claim to the title of distinct diseases from the distinct clinical pictures they present; all other cases must be lumped together under the heading of insanity *simpliciter*."

REFERENCE

Lancet, 18 February 1905, 445.

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Corrigendum

Retrospective analysis of risk factors in patients with treatment-emergent diabetes during clinical trials of antipsychotic medications. *BJP*, 184 (suppl. 47), s94–s101.

After publication of this paper, the authors became aware of errors in the original analysis. These are explained in a data supplement to the online article, located

at <http://bjp.rcpsych.org/cgi/content/full/184/47/s94/DC1>.