those who hold strong principles and ideals; (2) the absence of pre-formed interests or complexes to which the idea can attach itself, as in certain imbeciles; (3) the incompatibility of the idea with such interests as exist; (4) conflict of motives with the production of a state of doubt, a state which becomes pathological in anxiety hysteria; (5) various states of dementia. In accordance with these views the author finds it impossible to accept McDougall's classification of suggestion as an innate tendency, and holds that the process can only be explained by the action of the different instinctive tendencies, sentiments, complexes and interests involved.

It is shown that the object to be attained in treatment by suggestion, is to produce a condition of mind in the patient which will set going the right affective forces for the induction of those states of suggestibility, which will harmonize with and reinforce the ideas to be suggested and so get them accepted with conviction. This may be done by an appeal to the sentiments, by the effect of some emotional reaction such as surprise, by the counterbalancing of one emotion by another, or by the use of indirect suggestion through insinuation, with the help of drugs or deliberate deception. Suggestion is not claimed to be an ideal method of treatment and is not advocated as such, but is considered as a useful method in practice of removing symptoms in certain cases. [Author's abstract.]

Oberndorf, C. P. SOME PHASES OF AUTO-EROTISM. [N. Y. Med. Journal, November 8, 1919.]

Oberndorf traces the Freudian conception of the development of sex from the pleasurable sensations which primarily accompany bodily functions such as suckling, swaying and the simpler tactile movements. He emphasizes that it is only if one agrees to extend the definition of sex to include these movements which are demonstrably precursory to subsequent undeniable sex activities, that one can accept the definition that all pleasure finds in the last analysis in sex pleasure. He points out that the part of the body from which the child derives the greatest pleasure in body movements may subsequently become a zone for erotic satisfaction.

This satisfaction derived from one's own body is in its most primary stages purely auto-erotic, and there is scant distinction between the sexes during the auto-erotic period. From the erotic impulse which arises spontaneously and from within and finds its actual satisfaction in the individual's own body, the next developmental step is that in which the individual directs his impulses toward his own person or toward an image which he has elaborated to represent himself (Narcissism). In the narcissistic stage the images are apt to be of a fanciful object something like himself, *i.e.*, a homosexual image. From this transient and variable narcissistic period the normal individual progresses to heterosexual love object.

The author then proceeds to the discussion of masturbation as a phase of auto-erotism and narcissism. While fully cognizant of the fact that the material which is studied in the consultation room of a neurologist cannot be regarded as normal, he states that nearly every patient whom he has treated analytically is conscious of having passed through longer or shorter stages of narcissistic sex life during which he has masturbated or adopted some not greatly disguised substitutes for masturbation. In the study of many cases in both sexes he has not encountered alarming physical results from the simpler forms of masturbation when practiced moderately. If forced to fix a limit he considers masturbation after the age of 20 as beyond the range of normal.

Dr. Oberndorf lays great stress on the psychic accompaniments of masturbation, which tend to remove the person indulging in them further and further from the realities and actual demands of love making. Later the fancies require a tangibility, a permanence and a hold on the life of the individual, so that they become a nucleus for his sexual life and a standard comparison for all subsequent sex activities. In addition to the inability of the masturbator to mask the unreality of his fancied achievements, there is the sense of guilt and dishonesty and the feeling that retribution in some form must eventually be paid.

The advice so lightly given at times by physicians that intercourse outside of wedlock will solve the dilemma of a patient deeply involved in auto-erotism, often adds to his difficulties. In marriage sexual shortcomings necessarily involve the happiness of another individual. In extra conjugal sex relationship, failures in coitus emphasize the maladjustment and cause great alarm to the patient. Patients of this type should have their inhibitions to heterosexuality removed before attempting intercourse. Psychoanalytic procedures are the only method to successfully remove such inhibitions. [Author's abstract.]

Des Bancel, J. Larguier. THE THRILL. [Journal de Psychologie, 1920, Vol. 17, p. 168.]

That certain sonorous vibrations affect deep or superficial sensibility is generally admitted, but the thrill differs entirely from this sensation. In the first place, the thrill is not produced by music alone. Hermite, extolling the beauty of pure mathematics, speaks of theorems which thrill him. Passages of Corneille thrilled Madame de Sevigne. Descartes places admiration among the primitive passions and, indeed, at the very head of the list. In the opinion of this philosopher, admiration is nearly synonymous with surprise, astonishment, and curiosity, but in the language of to-day it implies something more. We may be curious and surprised without experiencing the slightest admiration. We admire only that which is beyond us—which causes us to feel our own insignificance. Far from representing a simple emotion, admiration, as we understand it, is the resultant of a concourse of various tendencies, pre-