called late recoveries. These belong to the exceptions, a statistical inquiry on 7698 cases in 3 institutions, giving the percentage to total admissions as about 1 per cent. to total recoveries at less than 5 per cent. As influences favoring late recovery, are absence of hereditary predisposition, age (occurrence of the climacteric), and occasionally acute intercurrent disease or injury. In conclusion the author tabulates 22 cases from various sources, and gives condensed histories of twelve cases occurring in his own institution. He has included no cases which have not remained well at least a year after their discharge.

ALLEN.

EIN BEITRAG ZUR KENNTNISS DER EPILEPTISCHEN BEWUSSTSEINSTÖRUNGEN MIT ERHALTENER ERINNERUNG (Disturbance of Consciousness in Epilepsy with Retention of Memory). K. Bonhoeffer Centralbl. f. Nervenheilkunde und Psychiatrie, October, 1900.

E. N., basketmaker, aged 23 years; father of a very irascible temper, who died by suicide; a brother had sick headaches. Patient developed slowly and had convulsions up to the age of five years. These ceased as his school life began. He was very backward in school. He was troubled by palpitation, dyspnea, etc. After leaving school, he was able to support himself by his trade as basketmaker. Not long before he came under treatment he was accused of numerous attempts at arson. It appeared that he drank to some extent and was very susceptible to the influence of alcoholics; would be made irresponsible while to all outward appearances he remained sober. On these occasions he had set fire to property. He claimed to have had an irresistible desire to see a conflagration, but when asked to explain why he set fire to houses which he knew were occupied by people, he stated that the possibility of destroying life had never occurred to him. In the fires which he had set he helped to extinguish the flames because he belonged to the volunteer fire brigade, and would have been fined had he not been present. Numerous other acts are related showing disturbances of consciousness without total loss of memory. Patient exhibited some stigmata of degeneration. It was evident that these peculiar impulses to crime belonged to epilepsy. During these periods the patient did not think and act like a normal man, nor even like himself. His desires and judgment were changed for the time. Nevertheless, he remembered all he did and why he did it, although his then state of mind appeared to his normal consciousness as foolish and his acts as unnecessary. On these occasions he had generally drunk something but not enough to intoxicate a normal individual. His retention of memory would show that these acts were not examples of pathological drunkenness. Indeed, the patient's recollection on these occasions was unusually acute. Even if the alcohol played a part in the causation of these seizures, which it undoubtedly did, the fact remains that the predisposition was already present, and furnished by neuropathic inheritance and makeup.

Seizures of this sort from any source, are seldom enough associated with keen remembrance. The difference in character shown by the patient when in the midst of these attacks, is another point of interest, as under ordinary circumstances there would be some analogy between the state of mind during the seizures and the habitual state. The patient was a natural hypochondriac and appeared to have a constant sense of dread and foreboding. This state was in no wise augmented during his seizures. The patient in fact appeared

while remembering all the facts, to regard them as no part of himself, but as if directed by another's will. CLARK.

UEBER HALLUCINATIONEN VORZÜGLICH GESICHTS-HALLUCINATIONEN AUF DER GRUNDLAGE VON CUTAN-MOTORISCHEN ZUSTÄNDEN UND AUF DERJENIGEN VON VERGANGENEN GESICHTS-EINDRÜCKEN (On Hallucinations, especially Visual Hallucinations, on the Basis of Cutaneo-Motor Conditions, and Past Visual Impressions). Mourly-Vold (Allg. Zeitschrift für Psychiatrie, 1900, lvii, 6, S. 834).

In this article the writer attempts to apply certain facts with regard to dream perceptions experimentally obtained, to the elucidation of so-called waking hallucinations. We are too prone, he thinks, to attribute abnormal visual perceptions for which no external cause can be perceived, to direct central irritation of the visual center, and his paper is almost entirely devoted to trying to prove that peripheral impressions, mainly those arising from the skin and from the muscles, may in a reflex manner and by association, call up certain visual images in the form of hallucinations. He has for some years been occupying himself with the study of dreams, attempting to influence them, through certain external stimuli, and has made a number of experiments upon a great many persons of both sexes, of which the following is a type. A number of subjects had one or both feet so bandaged as to produce strong plantar flexion, or put on one or both hands gloves which caused some flexion of the fingers, retaining them during the whole night. Each person was ordered to note his position on awakening and the nature of whatever dream he may have had, to record them as promptly as possible, and to fill out a blank scheme of questions bearing on the subject. As a control, the same methods of peripheral irritation were applied on the following evening and followed by attempts at suggestion. It was found that the character of the dreams was influenced, and more by the motor than by the cutaneous irritation, positive results being obtained in from 50 to 80 per cent. of the subjects, depending upon external circumstances.

From cutaneous irritation the subject had in his dream a more or less accurate perception of the irritating object applied to himself or to another person, or if an object related in some manner to the irritating object or to the irritated limb. From motor-cutaneous irritation arose dreams having to do with the production by the subject himself or by another of movements in which the constrained position of the foot played an integral part.

For example, those with bound feet dreamed of standing on their toes, of running, and of climbing stairs, or of seeing other persons carry out these movements, or felt themselves or saw some one else fixed in an unnatural position, e.g., standing on their toes. With these results the experiences of the author and others as to dreams occurring spontaneously, presumably through natural motor-cutaneous influences, agree. Tension of the muscles from any cause, circulatory disturbances, rheumatic pains in the limbs, etc., combined with exhausted brain condition, the author thinks may have a great influence upon the production and character of dreams.

He next seeks to apply the results of his experiments to waking hallucinations, and to this end takes up and studies a number of cases (from the *Reports of the Society for Psychical Research* and from other sources).