larly in relation to cretinism and hymus idiocy. All types and groups of abnormalities considered theoretically in the light of De Vries's mutation of species in plants.

Dr. Harold N. Moyer asked Dr. Young if she had found any description in the literature of that race of idiots called Shah Dahla's mice. The original article was published by an Indian surgeon in the Calcutta Medical Gazette. The speaker wrote to him and in reply received a copy of the paper, which he still has, and some original photographs of these idiots. They are a peculiar race. Their name is suggested by the shape of the head—resembling that of a mouse. They are a localized race of idiots, connected with the shrine. They are feeble-minded and seem from generation to generation to have bred true. They are protected by the priests of this shrine, and I suppose arrangements are made to continue the breed indefinitely. They do the begging for the shrine.

Dr. Young, in closing the discussion, said that as in all the literature only 22 cases of acrocephalic syndactylism had been found, and these had only recently been collected, it was possible that there might be other cases similar to those reported which diligent search would reveal.

COÖPERATION OF PSYCHOLOGIST AND PHYSICIAN

By Clara Schmitt, Ph.D.

The physician can be of help to many types of patients who seek his advice only in so far as he is a psychologist. The practical psychologist can be of great use in determining mental capacities and educational régime for the problem children who seek the advice of the physician. The following case illustrates the kind of coöperation possible. It was worked out between the author and the late Dr. D'Orsay Hecht.

Bertha N., nine years of age, became the victim of an obsession two days before the calling of the physician. The obsessive act consisted of the insertion of the finger into the throat, causing suffocation and brutality to the throat. Physically the child was frail in appearance; the gait was spastic-ataxic, that of a diplegia; choreatic movements of both hands; a cerebral diplegia, a generalized rigidity but more in the legs; vasomotor system a little but not much impaired; sensory system normal; superficial reflexes exaggerated; a Babinski reaction on the right, uncertain left; slight drooping of upper eyelid; reaction to light and accommodation somewhat sluggish; tongue tremor of choreiform character and slight speech defect. The advice given was that the child be observed for masturbatory practices; a mental examination to determine ability and educational possibilities; and a system of training and control.

The mental examination showed the child normal in mental ability. The examination also discovered a motor control so poor that the child was thereby unable to carry out many of the promptings of a very active mind. There was great emotional instability. Careful observation did not confirm the suspicion of masturbatory practices. The explanation arrived at for the obsessive act was that the child was constrained to it by reason of having been pushed out of her customary place in the family life which was organized about her interests and needs, by a throat operation upon her younger sister.

The patient was accepted at a private school and given some special attention. She improved rapidly in motor control, in emotional control and made normal progress in scholarship. The tremor of the fingers is still serious enough to interfere with writing. This impedes her work somewhat.

This patient was saved to a life of usefulness and happiness by a fortu-

nate diagnosis and proper educational care. One adviser had diagnosed her as mentally defective and recommended an institution for feeble-minded children. Another advised that she be not permitted to attend school but live a simple life in the country. The latter recommendation did not recognize the fact that she had a very active and capable mind, much hampered by the poor motor possibilities.

Dr. Schmitt said that the school to which the little girl had been sent was the Francis Parker School on the North Side. It is not designed for educating such cases. They have only a few children in each room.

Dr. Harold N. Moyer thought the analysis of the case by Dr. Schmitt was very interesting. At present our child study is not very broad. As commonly carried out, it consists in the application of Binet test and removal of adenoids. This was the first report in which the motor deficiency in the hands was the predominating defect in the education of a child in a normal way, and yet, after all, it is only what we see every day and all about us. The ability to use the hands for fine coordinated movements varies enormously.

Dr. Meyer Solomon thought the paper of Dr. Schmitt was very interesting. He thought that perhaps the family conditions might have been responsible, to a great extent, for the type of reaction displayed by the child. In view of the fact that the child was defective in the motor sphere, perhaps the mother was responsible by loving her too much, in this way bringing on this egotistical projection of herself into situations in which she demanded attention. There was no doubt in the speaker's mind that if the child had been permitted to remain at home, eventually she would have been unfit to hold her proper place in the world, and it is really due to Dr. Schmitt and Dr. Hecht that the child will be able to successfully fight her battle in life.

The whole problem opened up by the paper is one which ought to be forced home upon the profession more and more. The fact that from now on, at any rate, we are not going to look after the physical aspects only, but that the mental are coming more and more into the field of neurology, the speaker thought was encouraging, since we know that the functional neuroses and psychoneurotic states are far more frequent than the organic, and the outlook for these patients is far better. It brings us a great deal of hope for the future treatment and outcome in these conditions.

Dr. James C. Gill asked if he understood the essayist correctly, namely, that the limbs were spastic and a Babinski present.

Dr. Schmitt said that Dr. Gill had understood her correctly. It was hoped that the child would learn to control her hands sufficiently for writing, but she has now been in school for three years, and thus far has not gained sufficient control. Her writing is so poor that it interferes with her school work to some extent.

Just another incident in regard to the motor control in this little girl. Her writing was so poor that Dr. Schmitt recommended that they get a typewriter for her, and that maybe she could learn to use that. She is able to hammer out a few tunes on the piano. So it is hoped that the typewriter will help her in her school work.

Dr. Gill asked if there was a double Babinski in this case, to which Dr. Schmitt replied that it was positive on the left side.