

In Chapter seven the discussion of dominance and recessive factors is taken up and the evidence for and against is recapitulated. A study of the children of twenty old dementia præcox cases from Egfling show only two of eighty-one to have dementia præcox. Were it a Mendelian dominant at least 50 per cent. of the descendants should have developed the disease. Continuous inheritance from parent to child and then to the next generation, a striking "dominant" fact, rarely occurs and is not present in the author's very extensive material. Nor are such cases known to him in the literature. Furthermore the so-called dominant rule, once free always free, does not work out in the author's material. Collateral heredity is, as already seen, common. This is more characteristic of recessive than dominant factor inheritance.

Chapter eight deals with sex influences. The author's material shows that males and females are equally involved, with perhaps slighter prevalence of males. No definite sex inheritance factors appear in the figures.

Chapter nine deals with the problem of anticipation and the author concludes that such occurs in his material. The general anticipation age averages about 6.5 years. Whether this is a real law or a statistical artefact is still an open question. The necessary methods for study have not yet been applied to handle this problem decisively.

Chapter ten deals with the question whether a polymorphous trend or a general disposition to mental disturbance only lies in inheritance. The Weinberg methods, the author holds, are the only ones that offer an insight into this question and even with these the results are dubious. Chapter eleven deals with very complicated questions of clinical relationship and hereditary trends which cannot be easily summarized here.

The author promises to bring his entire material into presentable form some day, having here dwelt only with the statistical analysis. Family trees are omitted as they fill space only and are really only valuable through an abstraction of the results obtained. Taken all in all this study is one of the most careful and detailed bits of heredity study with which we are acquainted. We shall look forward to its continuation and can recommend the monograph to all students of hereditary problems.

JELLIFFE.

**Krueger, Hermann.** DIE PARANOIA. EINE MONOGRAPHISCHE STUDIE. Monographien a. d. Neurol. u. Psych., No. 13. Julius Springer, Berlin.

In spite of the great conflict the German publishers brought out a number of serious monographs in neurology and psychiatry during the war. This one appeared in 1917 and forms one of the excellent series originally inaugurated by Alzheimer and Lewandowsky and now, since their death, continued by Wilmano of Heidelberg and Forster of Breslau.

Of all of the subjects of psychiatric interest this one of paranoia has readily led. The reasons for this would probably be variously formu-

lated—but when the old Quaker is said to have remarked to his wife that “all the world is queer, save thee and me and thee is a little queer,” this aspect of “queerness” of the other fellow will probably be found to lie at the root of our interest in paranoia. The old Greeks meant by the word the mind that was queer “beside itself” and some of the classical Greek dramatists referred to certain individuals as paranoiac, who strangely enough became enmeshed in certain social situations which present-day psychiatry holds responsible for the type of illness now termed paranoia.

The present author however does not take us back so far. In fact he only starts with the present era of German psychiatry which began with Griesinger and the founding of the psychiatric clinics of that country. His historical summary, although not as rounded as it might be, is nevertheless quite readable and fairly orients the problem so far as the German psychiatry is concerned. He refers to it as a simple attempt to present the chief milestones in the development of the idea. As is fairly well known no systematist has gone so far as Kraepelin in limiting the present-day concept. Bleuler, who fairly represents the dynamic trend of modern day psychiatry, as Kraepelin heads the descriptive school, believes it is best to be included within his schizophrenic group.

The present monograph adopts a compromise attitude. Founded more or less upon an older Kraepelinian concept the general group is delimited by this brochure as including those psychoses characterized by the development of a delusional system of influence and of self-importance, logically built up and developed more or less along lines of present-day academic logical possibilities. It is characterized by its late development, its chronicity, its penetration throughout the entire personality. It develops, according to this author, on the basis of what he calls the paranoid constitution, involves the affective life, may lead to acute episodes, transitory as a rule, of great excitement or sometimes confusion, and may be accompanied by hallucinations of various types. The deterioration of the personality is not accomplished as a rule. So that formal thinking and actions is not seriously interfered with.

Three trends are here described, a *paranoia combinatoria*, a *paranoia hallucinatoria* and a *paranoia querulatoria* which are in turn richly outlined from the standpoint of a purely descriptive psychiatry.

The author's chief theme is the “paranoid constitution,” a sort of descriptive subterfuge which, while well outlined, does not really get into the gist of the individuality. Degenerative psychopathic trends is about as far as he can take us. All of this means very little. In fact the whole “degeneration” hypothesis is a bit of purely intellectualistic bumble puppy which gets us absolutely no further than our quoted Quaker's opinion concerning his own integrity of reason, although each author who attacks the problem makes a much more wordy effort at

defining "queer." Accepted standards of "queerness" at conscious levels are strange products when seen closer at hand through the study of the unconscious. The present author has no apparent use for the concept of the unconscious. He hardly mentions it, and when he does, it is apparent that the hypothesis is strange to him. Paranoia is an "exquisite degenerative disorder," he says. The foundation symptom is the development of a system of delusional ideas, the individual variation of which defies any transcribing. Two chief features he would emphasize, namely the inimical unfriendly or hateful attitude of others, which leads to the delusional ideas of influence and the development of ideas of grandeur. These develop side by side, or, in the querulent type, intermingle. Krueger would include a rich symptomatology of hallucinatory experiences—partly contributing to the delusional beliefs, or having no apparent relations to the same. It is rare he holds to have the delusional system founded upon the hallucinatory experiences.

As we have remarked the author knows nothing of, or will have nothing to do with the study of complexes, so his ideas as to the relationships of hallucinations to delusions are not of much value, since chiefly from this viewpoint has it become at all understood what the functions of hallucination and delusions really are.

Krueger then describes his three types. His *paranoia combinatoria* is made up of those paranoia cases in whom the genesis of the delusions and their further development proceeds from the paranoid psychopathic constitution with its paracritical thought method and its sick affectivity in a formal way uninfluenced by the presence of hallucinatory experiences. It is apt to begin earlier than the hallucinatory type and develops very slowly and insidiously. Ideas of influence are those more frequently appearing earlier than ideas of grandeur. The outbreak of the delusional ideas seems to relieve them from anxiety that previously influenced them continuously. The author fails to see this as a partial resolution of the inner conflict by the mechanism of projecting the difficulty outside of themselves—but, as has been pointed out, he has no dynamic conceptions, being bound up in the meaning of words, rather than the explanation of things.

The author then describes a number of delusional types which are clearly of the schizophrenic character, indicating the general haziness of his nosological conception.

*Paranoia hallucinatoria* contains many of the Kraepelian paraphrenic and præcox cases. Bleuler would probably group them all as schizophrenic cases. The hallucinations appear early and are closely related to the delusional system. The age of onset is about forty. *Paranoia querulatoria* is characterized by the concentration of the patient's delusional system upon the problem of justice and the social agencies of justice. The author seems to think it is a very rare type of the disease. In its mild type we are inclined to think it extremely widespread. A

rich field for investigation, namely among the half-baked social reformers, has apparently been neglected.

So far as the course, the treatment, the differential diagnosis, medico-legal considerations, etc., are concerned we find clear and straightforward treatment, but nothing that is particularly illuminating nor stimulating.

The monograph is well worth reading from the attitude of a clear setting forth of a moderate position towards the general problem of the paranoid individual.

It will offer little to the extreme Kraepelian who would essay to limit the group and hedge the concept about very sharply; again to the steadily growing dynamic school that seek more and more within the cravings of the individual the source for the symptom formations, the monograph will be found lacking in vital interest. To those of more eclectic and *laissez faire* proclivities it will be found a very acceptable and interesting summary.