

strength of the excursion, etc., resulting from the loss of the peripheral kinesthetic derivations. (3) To loss of the kinesthetic ideas: A condition not sharply differentiable from cortical ataxia-soul paralysis. (4) To Agnosia ("sensory" Assymboly-Apraxia in the old sense): A loss of perception or recognition by intact sensations. The identification of the fresh impressions with the memory pictures ceases, either by reason of the loss of the letter (Wernicke) or by reason of a delayed combination of both (Lissauer). (5) An indirect cause of disturbed action is the qualitative or eventually localized lapse of confined sensations: Cortical blindness, etc. The corresponding lapse for the kinesthetic areas is included under 2 (Ataxia).

Between 1, 2, 3, on the one hand, and 4 and 5 on the other there lies still (6) a motor (innervated) apraxia: The movement is not in accord with the ideatory process; the cortico-muscular apparatus functionates well, but is not in the service of the entire psychical processes. Not causing true focal symptoms, but conditioned by diffuse processes, eventually as general symptoms in large lesions is (7) ideatory apraxia: The movement is in accordance with the ideational process, but this in the end, disturbs the design of the movement series, by transposing the main goal idea to a secondary or partial goal idea. Ideatory apraxia is probably a part of a general ideational disturbance. (Memory, attention, etc), and allies itself mostly with Agnosia, eventually only with an ideatory agnosia. He makes a differentiation in this work between motor apraxia, ataxia and soul paralysis, and also enters more deeply into the consideration of the symptom of perseveration. His main contribution consists in the separation of a motor and an ideatory apraxia.

The work is one of great originality—schematic in the Wernicke sense—but no one can afford to overlook it. JELLIFFE.

CHRISTIANITY AND SEX PROBLEMS. BY HUGH NORTHCOTE, M. A. F. A. Davis Co., Philadelphia.

The wide extension of the discussion of sexual matters betokens the demand of a curious public, whose erotic sensibilities have been much stimulated in recent years by the press, the pulpit and the stage. Northcote's contribution contains much that is new and little that is untrue, and for many readers it will prove interesting. It has the advantage of being modest and non-prurient, and its honesty of motive is unassailable. This much cannot be said for all such similar volumes. Its chief interest lies in its analogies and commentaries drawn from the Hebrew writings concerning the relations of the sexes. On the whole, it is an excellent work. JELLIFFE.

STUDIES IN THE PSYCHOLOGY OF SEX. BY HAVELOCK ELLIS. F. A. Davis Co., Philadelphia.

Ellis makes another contribution to his growing list of studies. He here deals with Erotic Symbolism, The Unchanism of Detumescence and The Psychic State of Pregnancy. This terminates his series of studies on the usual phenomena of the sexual process, and he promises a concluding volume—one on the general problem in its social relations or the psychology of sex as interpreted in the light of social hygiene.

He includes under erotic symbolism all of the aberrations of the sexual instinct, although many of the phenomena have been already discussed by him in other volumes.

Exhibitionism-fetichism and like phenomena make up the early portion of the volume. Here are discussed a number of well known phenomena, and attempts are made at general explanations.

The phenomena of detumescence are taken up for the male and female in the second portion. The variations in detumescence are inadequately yet for the purposes satisfactorily handled. The third portion is an ex-

tremely interesting summary of the psychology of the female during child-bearing. Here are collected a mass of the strange psychical phenomena attendant on pregnancy. They are rich in suggestion, although not critically presented. The volume is on a par with the author's previous contributions, showing his zeal and discrimination and his scientific training.

JELLIFFE.

The Second Biennial Report of the Parsons State Hospital for Epileptics, at Parsons, Kan., claims for Kansas that it is the only State in the Union which has entirely separated the epileptic and non-epileptic insane. The total number of epileptics in Kansas is estimated at 3,000. The number cared for in the epileptic hospital has increased in two years from 170 to 355. Very young children, low grade imbeciles and idiots, are not received. Insane epileptics are committed by the courts. "Sane" epileptics are received on voluntary commitment; the latter cannot be detained against their will; and the Superintendent comments that the form of commitment is not always an index to the patient's mental condition. As regards marriage of patients prior to admission, he found that 30.7 per cent. of the men and 42.8 per cent. of the women had been married, and that 12.6 per cent. of the men and 25.7 per cent. of the women had married after the development of epilepsy. The "most important causes of epilepsy" as tabulated, were "bad heredity, infantile palsy, peripheral irritation, head trauma and alcoholism." The most frequent causes of death found were organic heart disease, exhaustion, pneumonia and status epilepticus.

C. E. A.

PHYSICIAN'S VISITING LIST, FOR 1907. P. Blakiston's Son & Co., Philadelphia.

The members of the medical profession—and they are many—who have learned to look for the issue of this small volume about this time of year will not be disappointed in its annual appearance. The completeness, compactness and simplicity of arrangement which have been its boast in the past are as conspicuous as ever, and it is in every respect strictly up to date. The strong and dignified binding, the appropriate size for carrying in the pocket, the pencil always ready for memoranda, and the secure pocket for loose slips combine to make it a very desirable part of the physician's equipment.

GOODALE.

UEBER ROBERT SCHUMANN'S KRANKHEIT. Von P. J. Möbius. Carl Marhold, Halle, 1906.

Möbius contributes another to his many series of biographical sketches. It was held by the physicians who treated Schumann and by those who performed the autopsy that he died of paresis, but Möbius has reviewed the entire history and shows with much wealth of detail that this is probably an incorrect deduction, and that even the pathological findings—not microscopically controlled, as is so necessary—are not conclusive.

He believes that Schumann suffered from dementia præcox, and this small monograph practically proves it. It is interesting reading.

JELLIFFE.